

ROSS FY 1999 FUNDING

PART V

RESIDENT SERVICE DELIVERY MODELS

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

OVERVIEW

PROGRAM DESCRIPTION

Resident Service Delivery Models (Families) These grants provide services to assist eligible residents to become economically self-sufficient, particularly families with children where the head of household would benefit from the receipt of supportive services and is working, seeking work, or is preparing for work by participating in job-training or education programs. Grants provide support for program activities essential to facilitate economic uplift and provide access to the skills and resources needed for employment, job development, and business development.

Resident Service Delivery Models (Elderly) This grant category provides supportive services for elderly residents and persons with disabilities.

ELIGIBLE APPLICANTS

- Family grants – PHAs and Tribes or Tribally Designated Housing Entities (TDHES) on behalf of public and Indian housing residents, or directly to resident management corporations, resident councils, or resident organizations, including nonprofit entities supported by residents.
- Elderly Disabled grants – PHAs and Tribes or TDHES.
- Previous EDSS, TOP, or Service Coordinator grantees must demonstrate that they have spent at least 75% of any prior grant by the publication date of this NOFA.

ELIGIBLE ACTIVITIES

Funds may be used for the activities described below, according to whether the application is for the family only category, or elderly and disabled only category.

Family Only

Program Coordinator. Applicants are encouraged to include a Program Coordinator for proposed RSDM activities for the entire term of the grant. A Program Coordinator is a person who is responsible for coordinating various proposed activities to ensure that their accomplishment will assist in achieving overall grant goals and objectives.

Physical improvements to provide space for self-sufficiency activities for residents, i.e. to provide cosmetic and repairs for space to conduct community activities; or to expand existing community space for proposed ROSS activities. Physical improvements **may not exceed 50%** of the total grant amount and must be directly related to providing

space for self-sufficiency activities for residents. Refer to Office of Management and Budget (OMB) Circular A-87, Cost Principles for State, Local and Indian Tribal Governments.

- Renovation, conversion, and repair costs may be essential parts of physical improvements. In addition, architectural, engineering, and related professional services required to prepare architectural plans or drawings, write-ups, specifications or inspections may also be part of the cost components to implement physical improvements.
- The renovation, conversion, or combination of vacant dwelling units in a housing development to create common areas to accommodate the provision of supportive services is an eligible activity for physical improvement.
- The renovation of existing common areas in a housing development to accommodate the provision of supportive services.
- The renovation or repair of facilities located near the premises of one or more housing developments to accommodate the provision of supportive services.

Entrepreneurship training (literacy training, computer skills training, business development planning).

Entrepreneurship development (entrepreneurship training curriculum, entrepreneurship courses).

Micro/Loan fund. Developing a strategy for establishing a revolving micro/loan fund and/or capitalizing a loan fund, including licensing, bonding, and insurance needed to operate a business.

Developing credit unions. Developing a strategy to establish and/or create onsite credit union(s) to provide financial and economic development initiatives to PHA or Indian housing residents. (RSDM grant funds cannot be used to capitalize a credit union.) The credit union could support the normal financial management needs of the community (i.e., check cashing, savings, consumer loans, micro-businesses money management, home buyer counseling educational loans, and other revolving loans).

Employment training and counseling (e.g., job training (such as apprenticeship programs), preparation and counseling, job search assistance, job development and placement, and continued follow-up assistance).

Employer linkage and job placement.

Family Only - Supportive Services Activities.

The provision of services to assist eligible residents to become economically self-sufficient, particularly families with children where the head of household would benefit

from the receipt of supportive services and is working, seeking work, or is preparing for work by participating in job-training or educational programs. Eligible supportive services may include, but are not limited to:

- Child care, of a type that provides sufficient hours of operation and serves appropriate ages as needed to facilitate parental access to education and job opportunities.
- Computer-based educational opportunities, skills training, and entrepreneurial activities.
- Homeownership training and counseling, development of feasibility studies and preparation of homeownership plans/proposals.
- Education including but not limited to: remedial education; computer skills training; career counseling; literacy training; assistance in the attainment of certificates of high school equivalency; two-year college tuition assistance; trade school assistance; youth leadership skills and related activities (activities may include peer leadership roles training for youth counselors, peer pressure reversal, life skills, goal planning). Academic support shall not be limited to TANF recipients.
- Youth mentoring of a type that mobilizes a potential pool of role models to serve as mentors to public or Indian housing youth. Mentor activities may include after-school tutoring, help with problem resolution issues, illegal drugs avoidance, job counseling, or mental health counseling.
- Transportation costs, as necessary to enable any participating family member to receive available services to commute to his or her training or supportive services activities or place of employment.
- Personal well-being (e.g., family/parental development counseling, parenting skills training for adult and teenage parents, self-development counseling, support groups/counseling for victims of domestic violence, and/or families with a mentally ill member, etc.).
- Supportive health care services (e.g., outreach and referral services to substance and alcohol abuse treatment and counseling, mental health services, wellness programs).
- Contracting for case management services contracts or employment of case managers, either of which must ensure confidentiality about resident's disabilities.
- Administrative costs not to exceed 20% of the grant amount.

- Stipends. No more than \$200 per participant per month of the grant award may be used for stipends for active trainees and program participants to cover the reasonable costs related to participation in training and other activities.

Elderly and Disabled - Supportive Services Activities

Such activities may include, but are not limited to:

- Meal service adequate to meet nutritional need;
- Assistance with daily activities;
- Housekeeping aid;
- Transportation services;
- Wellness programs, preventive health education, referral to community resources;
- Personal emergency response; and
- Congregate services - includes supportive services that are provided in a congregate setting at a conventional public or tribal housing development.

JOINT APPLICATIONS

Two or more applicants may join together to submit a joint application for proposed grant activities. Joint applications must designate a lead applicant. All parties in a joint application (lead or non-lead) are considered to be applying for ROSS and are therefore subject to the limit of one ROSS application per applicant, with the exception of those Service Coordinator applicants that may also apply in one additional ROSS category. Funding for joint applications may not exceed the stated maximum for this funding category.

APPLICATION SELECTION PROCESS

All applications are due no later than **90 days** from the publication date of this NOFA. Three types of reviews will be conducted: a screening to determine if the application submission is complete and on time; a threshold review to determine applicant eligibility; and a technical review to rate the applications based on five rating factors listed in the NOFA. A minimum score of **55** is required to be considered for funding.

HUD will conduct the selection process as follows for applicants other than tribes: HUD will first select the highest ranked application from each of the ten Federal regions for funding. After this “round,” HUD will select the second highest ranked application in each of the ten Federal regions for funding (the second round). HUD will continue this process with the third, fourth, and so on, highest ranked applications in each Federal

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region until the last complete round is selected for funding. If available funds exist to fund some but not all eligible applications in the next round, HUD will make awards to those remaining applications in rank order regardless of region and will fully fund as many as possible with remaining funds.

In addition, if all funds are not awarded in this funding category, funds are transferable to other funding categories in this NOFA in the following order: first, service coordinators; second, Resident Management and Business Development; third, Resident Capacity Building and/or Conflict Resolution.

The selection process is designed to achieve both geographic diversity and a more equitable distribution of grant awards throughout the country.

After rating and ranking, HUD will fund Tribes/TDHEs in rank order until all funds allocated for Tribes/TDHEs have been awarded to the extent that there are eligible applications. Any remaining funds will be transferable to other funding categories in this NOFA in the following order: first, to qualifying applications from Tribes/TDHEs for Resident Management and Business Development grants; second to qualifying applications from Tribes/TDHEs for Resident Capacity Building and/or Conflict Resolution; third, to qualifying applications for Resident Service Delivery Model grants from applicants that are not Tribes/TDHEs.

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Applicant: _____ **Date:** _____

APPLICATION CHECKLIST

Your application is complete when you have the following:

- ☐ **COVER MATERIALS (See Part II of this application kit for forms in this tab.)**
Table of Contents /Checklist
 - ☐ Application Checklist
 - ☐ Application for Federal Assistance (Form SF-424)
 - ☐ Budget Information—Non-Construction Programs (Form SF-424A)
 - ☐ Fact Sheet
 - ☐ Program Summary
- ☐ **TAB 1**
Threshold Requirements
 - ☐ Threshold Checklist
 - ☐ Chart A: Resident Characteristics (Family RSDM Applicants Only)
 - ☐ Elderly Housing Development Certification (Elderly RSDM Applicants Only)
 - ☐ Accessible Community Facility
 - ☐ Match Requirements
 - ☐ RSDM Applicant/Administrator Certification
 - ☐ RA or “Troubled HA” Use of Contract Administrator
 - ☐ Proof of Nonprofit Status (RA & Nonprofit Applicants Only)
 - ☐ Certification of Resident Council Board Election (RA Applicants)
 - ☐ Compliance with Civil Rights Requirements Certification

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APPLICATION CHECKLIST (Continued)

- ☐ **TAB 2**
Capacity of the Applicant and Relevant Organizational Experience
 - ☐ Chart B: Program Staffing
 - ☐ Chart C: Applicant/Administrator Track Record
 - ☐ Organization Chart
 - ☐ Staff Position Descriptions
 - ☐ Capacity of the Applicant and Relevant Organizational Experience
 - ☐ Staff Resumes
- ☐ **TAB 3**
Needs/Extent of Problem
 - ☐ Needs Assessment Report
- ☐ **TAB 4**
Soundness of Approach
 - ☐ Chart D: Summary Budget Information
 - ☐ Chart E: Detailed Budget
 - ☐ Chart F: Activity Plan Summary
 - ☐ Chart G: RSDM Activity Breakout
- ☐ **TAB 5**
Leveraging Resources
 - ☐ Chart H: Program Resources

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APPLICATION CHECKLIST (Continued)

- ☐ **TAB 6**
Comprehensiveness and Coordination
 - ☐ Certification of Consistency with the Consolidated Plan
- ☐ **TAB 7**
Bonus Points
 - ☐ EZ/EC Certification
- ☐ **TAB 8**
Other Certifications and Assurances (See Section VII of this Application Kit for all forms in this tab.)
 - ☐ Assurances – Non-Construction Programs (Form SF-424B)
 - ☐ Certification for a Drug-Free Workplace (Form HUD–50070)
 - ☐ Applicant/Recipient Disclosure/Update Report (Form HUD-2800)
 - ☐ Applicant's Disclosure on Lobbying Activities
 - ☐ Disclosure of Lobbying Activities (Form SF- LLL)
 - ☐ Certification of Payments to Influence Federal Transactions (Form HUD 50071)
 - ☐ Certification or Disbarment and Suspension (Form HUD–2992)
 - ☐ Acknowledgement of Application Receipt

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TAB 1

THRESHOLD REQUIREMENTS

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THRESHOLD CHECKLIST

Applicant: _____

Date: _____

You must address the following threshold requirements for your application to be complete and acceptable for rating and ranking. You can verify that information is included in your application kit by using a check mark in the space provided. Please note that HUD will also verify that information is included appropriately. (See NOFA, Section V (G) and VII)

THRESHOLD REQUIREMENT	APPLICANT USE ONLY	HUD USE USE ONLY
1. Focus on Residents Affected by Welfare Reform (Family applicants only)	_____	_____
2. Elderly Housing Development Certification (Elderly applicants only)	_____	_____
3. Accessible Community Facility	_____	_____
4. Match Requirement	_____	_____
5. Compliance with Current Programs	_____	_____
6. For RAs and or "troubled" PHAs: document that a Contract Administrator (or equivalent organization) will administer the grant.	_____	_____
7. Applicant Nonprofit Status (RA and non- profit applicants only)	_____	_____
8. Certification of Elections (RA applicants only)	_____	_____
9. Compliance with Civil Rights Requirements	_____	_____

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Applicant: _____

Date: _____

THRESHOLD REQUIREMENTS

See NOFA, Section V(G) and VII

The Grants Management Center (GMC) will conduct a threshold review to determine your eligibility. Under the threshold review, you will be rejected from the competition if you are not in compliance with the threshold requirements.

1. Focus on Residents Affected by Welfare Reform. Your Family RSDM application must contain written evidence that at least 51% of residents to be included in your proposed program are affected by welfare reform legislation. This requirement is not applicable to your program if it serves the elderly or persons with disabilities.

Complete the following **Resident Characteristics Chart** for the housing development you propose to serve. Indicate whether separate charts were completed for each development or whether one chart was prepared for the developments combined.

General Instructions for the Resident Characteristics Chart

It is not required that every statistic requested in the **Resident Characteristics Chart** be provided. Nevertheless, the data provided must be sufficient to permit: (1) an assessment of the needs of eligible potential participants related to your proposed program goals, which for Family RSDM applications must focus on moving residents from welfare to work; and (2) development of, and documentary support for, work activities that meet these needs. Charts E and F constitute a work plan to meet the needs identified in the **Resident Characteristics Chart** and the Needs Assessment Report. For Family RSDM applications, your data must demonstrate that at least 51% of participating residents **are** TANF recipients or affected recipients of Food Stamps and SSI. Elderly or disabled residents may be included in the 51% if: (1) their Medicaid or Food Stamp benefits are affected by welfare reform, or (2) they provide services such as child care or mentoring to families affected by welfare reform.

Complete the first column in the Resident Characteristics Chart to describe the entire resident population in the public and Indian housing or other development(s) identified in your proposed program. Break out data for TANF/AFDC families in the second column, and for Elderly/Disabled persons/families on SSI in the third column.

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General Instructions for the Resident Characteristics Chart (continued)

Indicate “**NA**” in any answer space for data requested that is not available or not pertinent to the clientele proposed to be served. **For example**, if you propose to serve TANF/AFDC families only, you may put “**NA**” in all items under the entire column for “**Elderly/Disabled on SSI.**” You are not required to conduct a survey prior to submitting your application for the sole purpose of completing the Resident Characteristics Report. If no survey information is available on a particular topic, specify the various population subgroups that you propose to serve.

If you propose to assist more than one site you may aggregate data for all sites in a single Resident Characteristics Chart under the column “**Proposed Developments.**” Notwithstanding, if you want to highlight distinctions between sites related to need, you may want to provide a separate **Resident** Characteristics Chart for each site.

If you are providing separate Resident Characteristics Charts for each site, you **must** write the name of the development for which the Resident Characteristics Chart was prepared at the top of each chart. If you are providing aggregate data for all sites you propose to assist in a single Resident Characteristics Chart, you should write the word “**ALL**” in the space provided.

Finally, in the last row, specify the number of persons you plan to serve in your proposed RSDM–funded program.

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Applicant: _____

Date: _____

Chart A: RESIDENT CHARACTERISTICS IN _____ DEVELOPMENT(S) PROPOSED FOR ASSISTANCE UNDER RSDM

DEMOGRAPHIC STATISTICS SHOWING NEED

	All Residents in Proposed Development	TANF/AFDC Families Only	Elderly/Disabled on SSI Only
Total Number of Households			
Average Household Income			
Number of Children: <i>Preschool 0-5</i>			
<i>Grade School 6 – 12</i>			
<i>Teenagers 13 –17</i>			
TOTAL			
Number & Pct. of Households w/Children	/	/	/
Number & Pct. over 65 years	/	/	/
Number & Pct. with Disabilities	/	/	/
Number & Pct. Adults with High School Diploma/GED	/	/	/
High School Dropout Rate/Number			
Number & Pct. Heads of Household Unemployed	/	/	/
Number & Pct. Heads of Household :	/	/	/
<i>Employed Full-Time</i>			
<i>Employed Part-Time</i>			
TOTAL			
Number & Pct. Households on Welfare (TANF, SSI, etc)	/	/	/
Number/Pct. Adults in: <i>Job Training</i>	/	/	/
<i>Entrepreneurship Training</i>			
<i>Community Service Program</i>			
Number & Pct. Households with Non-Citizens Impacted by Welfare Reform	/	/	/
Other Statistical Indicators			
Number of residents to be served by RSDM grant			

In the space below, specify the source(s) of the above statistical information -- e.g., Census of Population Tract Data; housing agency's data systems based on the residents' Form HUD-50058; HUD's Multifamily Tenant Certification System; or other data source.

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Applicant: _____

Date: _____

2. Elderly Housing Development Certification You must certify that at least 25% of the residents in the development(s) proposed for the grant activities are elderly and/or non-elderly people with disabilities.

**RSDM ELDERLY HOUSING
DEVELOPMENT CERTIFICATION**

I CERTIFY that ___ % of the residents in the development(s) proposed for the grant activities are elderly and/or non-elderly people with disabilities at the time of the application; thereby meeting or exceeding the 25% requirement.

Signed this _____ day of _____, 1999

By: _____
Applicant Executive Director of other Authorized Representative

For: _____
Applicant Name

Verified by: _____ Date: _____
For GMC

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Applicant: _____

Date: _____

3. Accessible Community Facility. You must provide evidence **(e.g., an executed use agreement if the facility will be provided by an entity other than your organization)** that a majority of your proposed activities will be administered at community facilities within easy transportation access of your property. The facilities must be within walking distance or accessible by direct (i.e., no transfers required), convenient, inexpensive, and reliable transportation. Any community facilities must meet the structural accessibility requirements of Section 504 of the *Rehabilitation Act* and the *Americans with Disabilities Act*.

Provide a description of the location where training and other activities will be held. Describe where the facility is located in relation to the development(s) to be served, the days and hours of operation, how transportation needs to the facility will be addressed, and how the facility will be accessible to persons with disabilities. Also describe whether the facility to be used is currently in operation, if not, what steps will be taken to adequately operate the facility.

Attach an executed agreement between the applicant and other entity providing community facilities.

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Applicant: _____

Date: _____

4. Match Requirement. You must supplement grant funds with a cash and/or in-kind contribution match of not less than at least 25% of the grant amount. The match may include: cash and/or the value of in-kind services, contributions or administrative costs provided to you; funds from Federal sources (but not ROSS, TOP, EDSS, or SC funds); funds from any State or local Government sources; and funds from private contributions.

Your application must demonstrate that the resources and services you will use as match amounts (including resources from your Comprehensive Grant, other governmental units/agencies of any type, and/or private sources, whether for-profit or not-for-profit) are firmly committed and will support your proposed grant activities. "Firmly committed" means there must be a written agreement to provide the resources and services signed by an official legally able to make commitments on behalf of the organization. The written agreement may be contingent upon you receiving a grant award.

Attach all separate firm commitments that equal at least 25% of the RSDM grant amount requested.

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Applicant: _____

Date: _____

5. Compliance with Current Programs. Your organization must be in compliance with all the requirements of any HUD grant programs designed to assist resident self-sufficiency in which you are currently participating.

**RSDM APPLICANT/ADMINISTRATOR
CERTIFICATION**

I CERTIFY that my response to the following three questions are correct:

1. Is there any current HUD declaration of default against your organization or, if applicable, Contract Administrator for failure to meet any contractual obligation?
YES or NO (Please circle one.) (Explain any "YES" response.)

2. Are there any unresolved HUD Office of Inspector General Findings against your organization or Contract Administrator?
YES or NO (Please circle one.) (Explain any "YES" response.)

3. Are there any unresolved HUD Fair Housing and Equal Opportunity monitoring review findings or HUD Field Office management review findings against your organization?
YES or NO (Please circle one.) (Explain any "YES" response.)

Signed this _____ day of _____, 1999

By: _____
Applicant Executive Director or other Authorized Representative

For: _____
Applicant Name

Verified by: _____ Date _____
For GMC

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Applicant: _____

Date: _____

6. Contract Administrator. Unless HUD or an Independent Public Accountant have determined that the applicant's financial management system and procurement procedures fully comply with 24 CFR part 84, applications must contain evidence that the applicant will use the services of a Contract Administrator. Troubled PHAs are required to provide evidence that a Contract Administrator has been retained for the term of the grant. A Contract Administrator, if retained, must oversee the financial activities and assist with the entire implementation of the grant. A signed executed agreement must be included in the application. A sample agreement is included on the following page. This agreement may be contingent upon the applicant receiving a grant award.

The Contract Administrator may be: Local Housing Agencies (except for troubled PHAs); community-based organizations such as Community Development Corporations (CDC), churches; nonprofits; and State/Regional associations and organizations. If a grantee is unable to obtain the services of a Contract Administrator or accountant without charge, the cost for a Contract Administrator and/or accountant is an eligible cost under the grant. The grantee is required to maintain documentation on file showing what efforts it made to obtain the services of a Contract Administrator cost-free.

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SAMPLE RSDM CONTRACT ADMINISTRATOR PARTNERSHIP AGREEMENT

This partnership agreement is made and entered into by and between the Contract Administrator (CA), (e.g., the local housing authority agency (PHA) or other non-profit corporations), hereinafter referred to as "CA," and the applicant

WHEREAS, the applicant is submitting this proposal for a Resident Service Delivery Model (RSDM) Grant to further its objectives.

WHEREAS, the applicant agrees to comply with all terms and conditions expressed in HUD's NOFA, applicable provisions of 24 CFR 964, provisions of any technical assistance grant agreement entered into with HUD, and any other stipulations made by the CA and agreed to in writing by a duly authorized representative of the applicant pertaining to the technical assistance provided.

WHEREAS, the CA supports the applicant's RSDM application and agrees to provide technical assistance to the applicant in accordance with HUD's regulations.

WHEREAS, pursuant to the commitment made by the CA, this agreement is executed outlining the type, scope and extent of services that the CA will provide to the applicant if the grant is funded. If HUD does not fund the grant, this agreement shall be null and void.

Both parties herein fully understand and agree to the following:

Roles and Responsibilities

The CA agrees to oversee the administration of the RSDM grant that includes financial management, procurement, completing the semi-annual reports, and ensuring that all grant activities are completed successfully within the grant period. In meeting these commitments, the CA agrees to abide by the provisions of 24 CFR Parts 964, 45, 84, and 85 and OMB Circulars A-87 and A-122.

The CA agrees to operate under the direction of the applicant. The applicant retains ultimate responsibility for all grant activities, including drawing down funds from HUD, grant expenditures, and reporting to HUD. The CA will have authority to draw down funds and submit reports to HUD only with the written authorization of the applicant. All checks and other expenditures in an amount higher than \$_____ must be signed and/or approved by the applicant or CA.

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SAMPLE RSDM CONTRACT ADMINISTRATOR PARTNERSHIP AGREEMENT (continued)

The CA agrees to conduct an educational needs assessment to determine the skills of each resident selected to participate in the various training programs designed by the applicant.

Coordination of Grant Activities

The CA agrees to coordinate the provision of assistance from community organizations, governmental officials, and other public services on a variety of related topics and available relevant resources to the residents. Following are suggested resources:

- Elected Officials
- Area Enrichment Programs
- Local Banks - Community Relations Departments
- Chamber of Commerce - Small Business Development Programs
- Community Development Agencies
- Private Industry Council
- Local and State Health and Human Services Agencies & Affiliates
- Local Higher Education and Continuing Education Facilities
- Local Independent School Districts
- Community Social Services Organizations

Technical Assistance may also be provided on a variety of areas including but not limited to: general bookkeeping/record keeping procedures, procurement policies; banking procedures; and managing grant funds.

Program Assessment

The CA agrees to coordinate, conduct or assist the applicant in assessing the RSDM activities based on the methodology in the applicant's proposal to HUD.

Contracted Amount

No funds will be paid to the CA for services rendered prior to HUD selection of the applicant for RSDM funding or for services rendered prior to the execution of a grant agreement between the applicant and HUD. This agreement is conditioned on HUD's selection of the applicant for RSDM funding.

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**SAMPLE RSDM CONTRACT ADMINISTRATOR PARTNERSHIP AGREEMENT
(continued)**

The contracted amount for all services defined within the context of this contract is based on a _____ period of time beginning _____ and ending _____, or \$ _____ for year one of the project, and \$ _____ for year two of the project with year two beginning _____. The installment payments shall be made in the amount of \$ _____ to _____ upon submission of a Payment Voucher (PV) for costs incurred.

Termination

The applicant may terminate this agreement within 60 calendar days of written notice to the U.S. Department of Housing and Urban Development and the CA. Termination may be based on non-compliance or non-cooperation by the CA. Termination may only occur when all channels of resolution have been exhausted, including mediation between the two parties. If all avenues have been exhausted, termination will require a two-third majority vote of the Board of Directors of the applicant.

WITNESS OUR HANDS EFFECTIVE _____

Applicant

Contract Administrator

Applicant Executive Director or
Other Authorized Representative

Executive Director

Date

Date

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Applicant: _____

Date: _____

7. Applicant Nonprofit Status. Both RA and nonprofit applicants **only** must submit evidence that the applicant is registered with the State as a nonprofit corporation at the time of application submission. Nonprofit applicants must have Section 501(c) nonprofit corporation status with the United States Internal Revenue Service at the time of application submission.

Evidence of State incorporation for all nonprofit applicants shall be a copy of the Certificate of Incorporation or Certificate of Good Standing from the State government (Secretary of State or Secretary of Corporations). Evidence of a nonprofit applicant's current nonprofit status shall be a copy of the IRS's designation.

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Applicant: _____

Date: _____

8. Certification of Elections. RA applicants must submit certification of the RA board election as required by HUD, signed by the local PHA or TDHE and/or an independent third-party monitor and notarized.

Certification of Resident Council Board Election

I CERTIFY _____
(name of organization)

located in _____ has duly elected all of
(city & state)

Resident Council Officers as required by the U.S. Department of Housing and Urban Development, 24 Code of Federal Regulations, Part 964.

Date of Last Resident Council Board Election: _____

(Name and Title of Certifying Housing Agency Official)

(Signature) (Date)

(Name and Title of Independent Third-Party Monitor)

(Signature) (Date)

NOTARY (*Signature & Date*)

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Applicant: _____

Date: _____

9. Compliance with Civil Rights Requirements. You must be in compliance with all fair housing and civil rights laws, statutes, regulations, and executive orders as enumerated in 24 CFR 5.105(a). Federally recognized Indian tribes must comply with the *Age Discrimination Act of 1975* and the *Indian Civil Rights Act*. If you, the applicant, (a) have been charged by the Secretary with a violation of the *Fair Housing Act*, (b) are the defendant in a *Fair Housing Act* lawsuit filed by the Department of Justice, or (c) have received a letter of noncompliance findings under Title VI of the *Civil Rights Act*, Section 504 of the *Rehabilitation Act*, or Section 109 of the *Housing and Community Development Act*, then you are not eligible to apply for funding under this NOFA until you resolve such charge, lawsuit, or letter of findings to the satisfaction of HUD. Complete the following certification. (See NOFA, Sections VII(A), VII(B), and VIII(A).)

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RSDM CERTIFICATION OF CONSISTENCY AND COMPLIANCE

I CERTIFY that the proposed RSDM activities will be consistent with the following and comply with all statutes, regulations, and U.S. Department of Housing and Urban Development guidance related to the following:

1. **Economic Opportunities for Low and Very Low-Income Persons.** Section 3 of the *Housing and Urban Development Act of 1968*, 12 U.S.C. sec. 1791u, Economic Opportunities for Low and Very Low-Income Persons; HUD regulations at 24 CFR part 135, including but not limited to subpart E and G reporting requirements; and any Section 3 employment, housing opportunity, or other plan adopted by the Housing Agency.
2. **Fair Housing.** Affirmative duty to further fair housing, including elimination of impediments to fair housing; the local jurisdiction or regional Analysis of Impediments to Fair Housing Choice; and the affirmative duty to carry out activities proposed specifically in the RSDM application to address the furtherance of fair housing.
3. **Uniform Relocation.** *Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970*, as amended (URA) and implementing regulations at 49 CFR part 24.
4. **Nondiscrimination.** The *Americans with Disabilities Act*, Title IX of the *Education Amendments Act of 1972*, the *Fair Housing Act*, Title VI of the *Civil Rights Act of 1964*, the *Equal Pay Act*, Section 504 of the *Rehabilitation Act of 1973*, the *Age Discrimination Employment Act of 1967*, and the *Age Discrimination Act of 1975*.
5. **Cost Principles.** OMB Circular No. A-122 (Cost Principles for Nonprofit Organizations) or OMB Circular No. A-87 (Cost Principles for Local Units of Government), as appropriate.
6. **Administrative Requirements.** The administrative requirements of 24 CFR part 84 or part 85, as appropriate.

Signed this _____ day of _____, 1999.

By: _____
Applicant Chief Executive Officer or Other Authorized Representative

For: _____
Applicant

Verified by: _____ Date _____
For GMC

ROSS FY 1999 FUNDING

RESIDENT SERVICE DELIVERY MODELS

TAB 2

RATING FACTOR 1:

Capacity of the Applicant and Relevant

Organizational Experience

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant: _____

Date: _____

Rating Factor 1: Capacity of the Applicant and Relevant Organizational Experience (20 points)

This factor addresses the extent to which your organization has the resources necessary to successfully implement your proposed activities in a timely manner.

Rating Factor 1(1): Proposed Program Staffing (7 points)

Provide a description of your staffing and program administration. (See NOFA, Section V(I), Rating Factor 1(1).)

Include a narrative description of your proposed staffing (paid or volunteer) in support of your proposed program and proposed coordination among service providers; a completed Chart B, an organization chart, staff position descriptions, and resumes. Collectively, these items should identify the following:

- 1) An explanation of how your staffing plan is structured to accomplish your program objectives;
- 2) A staff person(s) who will have primary responsibility for effective overall coordination of your program on a day to day basis and what percentage of his/her time will be committed to this responsibility;
- 3) Names of responsible applicant staff and Contract Administrator staff persons, position descriptions, proposed roles in implementing the RSDM program, relevant skills, and percentage of time allocated to the program; and
- 4) A comprehensive break-out of who will provide training and related services and how the services will be delivered. Indicate who will conduct training: you, the Contract Administrator, a contractor, another applicant, or other partner.

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant: _____ Date: _____

Proposed Program Staffing (7 points)

- (a) Experience (4 points). Describe the knowledge and experience of your overall proposed project director and staff. Include among staff the day-to-day program. Also include staff for subrecipients and partners in planning and managing programs for which funding is being requested. Experience will be judged in terms of recent, relevant, and successful experience of your staff to undertake eligible program activities.

**ROSS FY 1999 FUNDING
RESIDENT SERVICE DELIVERY MODELS**

Applicant: _____

Date: _____

Proposed Program Staffing (continued)

- (b) Sufficiency (3 points). Describe the extent to which you, your subrecipients, and your partners have sufficient personnel to deliver your proposed activities in each proposed service area in a timely and effective fashion, including your readiness and ability to immediately begin your proposed work program. Alternatively, describe how you will be able to quickly access qualified experts or professionals. To demonstrate sufficiency, you must submit:
- (1) the proposed number of staff years to be allocated to the project by employees and experts,
 - (2) the titles and relevant professional background and experience of each employee and expert proposed to be assigned to your project, and
 - (3) the roles to be performed by each identified employee and expert.

Chart B: PROGRAM STAFFING

Applicant Name: _____

I. APPLICANT/CONTRACT ADMINISTRATOR				
Name of Staff Person	Organization and Position	Role in Grant Program	Percent of Time on Grant	Cost to Grant

II. CONTRACTOR ROLE		
Type of Contractor to be Solicited	Role in Grant Program	Estimated Cost to Grant Program

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant: _____ Date: _____

Rating Factor 1(2): Program Administration and Fiscal Management (7 points)

Describe the proposed management structure of your proposed RSDM program. To receive a high score in Rating Factor 1, subfactors (2)(a) and (2)(b), you must provide a clear comprehensive description of the following:

- (a) Program Administration (4 points). Describe your project management structure, including the use of a Contract Administrator, if applicable (RAs and those PHAs designated as “troubled” by HUD **must** appoint or contract with a Contract Administrator). Describe how co-applicants, subgrantees, and other partner agencies relate to the program administrator as well as the lines of authority and accountability among all components of your proposed program.

**ROSS FY 1999 FUNDING
RESIDENT SERVICE DELIVERY MODELS**

Applicant: _____ Date: _____

Program Administration and Fiscal Management (continued)

- (b) Fiscal Management Structure (3 points). Describe your fiscal management structure, including but not limited to budgeting, fiscal controls, and accounting. Clearly identify the staff responsible for fiscal management, and the processes and timetable for implementation during your proposed grant period.

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant: _____

Date: _____

Rating Factor 1(3): Applicant/Administrator Track Record (6 points)

This Tab provides information related to you and, if applicable, your Contract Administrator's past performance.

Instructions for Chart C

Complete the Applicant/Administrator Track Record Chart in this Tab (Chart C). A sample and blank chart are located in this Tab. Include in Chart C your or your Contract Administrator's prior performance in successfully carrying out grant programs designed to assist residents in increasing their self-sufficiency, security, or independence.

To receive a high score, you must demonstrate your (or the proposed Contract Administrator's) program compliance and successful implementation of any grant programs oriented to resident self-sufficiency, security, or independence. Grants in this category include, but are not limited to:

- Economic Development and Supportive Services
- Family Investment Center Program
- Youth Development Initiative under the Family Investment Center Program
- Youth Apprenticeship Program
- Apprenticeship Demonstration in the Construction Trades Program
- Urban Youth Corps Program
- HOPE I Program
- Public Housing or Section 202/8 Service Coordinator Program
- Public Housing Drug Elimination Program
- Section 8 Family Self-Sufficiency
- Youthbuild
- Youth Sports Program
- Tenant Opportunities Program
- Housing Counseling
- HUD Nehemiah Program
- Limited Equity Housing Cooperative Conversions
- Resident services or empowerment programs sponsored by State or local governments or private foundations

SAMPLE – Chart C: RSDM APPLICANT/ADMINISTRATOR TRACK RECORD

Applicant: *Ourtown Housing Authority*

HUD PROGRAM	PROJECT NUMBER	% OF TERM COMPLETE D	% FUNDS DRAWN DOWN	MAJOR GOAL #1	% COMPL ETE	MAJOR GOAL #2	% COMPL ETE
Youth Apprenticeship Program	PA99Y AP 002033 04	100%	75%	To enable 30 resident youth to complete community service programs.	90%	To enable 30 resident youth to complete apprenticeship training.	67%
Drug Elimination Grant	PA99D EP 003060	90%	80%	To train resident patrols in seven developments.	71%	To implement resident patrols in seven developments.	57%

Chart C: RSDM Applicant/Administrator Track Record

Applicant: _____

Program	Project Number	% of Term Complete	% of Funds Drawn Down	Major Goal #1	Percent Complete	Major Goal #2	Percent Complete

ROSS FY 1999 FUNDING

**RESIDENT SERVICE DELIVERY
MODELS**

TAB 3

Rating Factor 2: Need/Extent of Problem

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant Name: _____

Date: _____

Rating Factor 2: Need/Extent of the Problem (20 points)

This factor addresses the extent to which there is a need for funding your proposed program activities. Your proposed activities should address a documented problem in the targeted development(s) – the development(s) where your proposed activities will be carried out. Your application will be evaluated on the extent to which you document a critical level of need in the targeted development(s). (See NOFA, Section V(I).)

Rating Factor 2(1): Needs Assessment Document (18 points)

You **must** submit the attached **Needs Assessment Report** dealing with your proposed recipient population. At a minimum, the report must contain sections covering statistical or survey information on the needs of the recipient population and identifying existing resources to help meet the needs. HUD will award you up to **18 points** based on the quality and comprehensiveness of your Needs Assessment Report.

You should respond to all relevant questions on the following pages. A complete set of responses will provide HUD with a comprehensive and succinct presentation of the information required to demonstrate your need for RSDM funds. In addition, you must complete the **Resident Characteristics** (Chart A) as a threshold requirement, in Tab 1, of your RSDM application.

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant Name: _____ Date: _____

Rating Factor 2(2): Level of Priority in Consolidated Plan (2 points)

Below, describe how your proposed RSDM activities will conform with the community's Consolidated Plan or Indian Housing Plan. For small cities, this may be the State's Consolidated Plan. Document the level of priority that the Consolidated Plan places on the needs described under Rating Factor 2(1). Also, describe how your proposed activities will conform with other planning or legal documents, such as the area's Analysis of Impediments to Fair Housing Choice (AI) or a court order. (See NOFA, Section V(I), Rating Factor 2(2).)

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant Name: _____ Date: _____

Rating Factor 2(1): Needs Assessment Document (18 points)

NEEDS ASSESSMENT REPORT

A.

Briefly describe the results of any survey of residents in the target development(s) by the applicant, welfare department, or other source or provide other empirical observations (not reflected in the statistics on Chart A of Tab 1) regarding:

1. Resident professional, vocational, and educational skills and interests.

2. Resident training and supportive service needs related to moving from “welfare-to-work” such as counseling, literacy, English language skills, day care, transportation, and accommodation to disabilities.

(If you are applying for Elderly and Disabled Persons RSDM funds, you need not respond to the questions above, but should provide a brief discussion of any survey information dealing with your residents' needs. You do not need to conduct a survey prior to application submission for the sole purpose of responding to this Needs Assessment Report. If no survey information is available on a particular topic, write N/A.)

B.

Describe: (1) various employment opportunities in the community which address the range of resident educational levels, skills, and other characteristics profiled in the previous page (or Chart A of Tab 1) of this Needs Assessment Report; (2) any training programs between 1 week and 18 months long and supportive service (such as transportation) that would be required for public or Tribal housing residents and are unique to each opportunity; and (3) the extent to which each opportunity provides a stable livelihood sufficient to support families with children.

(If you are applying for RSDM funds for elderly and/or persons with disabilities, you do not need to respond to the above question.)

C.

Key Subpopulations.

Based on the profile of the resident population and information on job opportunities, name key segments of your resident population that need training, economic development, or supportive services for Family Self-Sufficiency or independent living for the elderly/persons with disabilities. Describe your need briefly.

1. Actual or Estimated % on TANF/SSI/other type of welfare:

Source of Data or Justify Estimate:

Population:

Need:

2. Actual or Estimated % on TANF/SSI/other type of welfare:

Source of Data or Justify Estimate:

Population:

Need:

3. Actual or Estimated % on TANF/SSI/other type of welfare:

Source of Data or Justify Estimate:

Population:

Need:

4. Actual or Estimated % on TANF/SSI/other type of welfare:

Source of Data or Justify Estimate:

Population:

Need:

5. Actual or Estimated % on TANF/SSI/other type of welfare:

Source of Data or Justify Estimate:

Population:

Need:

D.

Describe how the extent and nature of these needs are affected by welfare reform. Include in this discussion a brief summary of key provisions your State or Tribal government's welfare reform plan that are applicable to the population you intend to serve.

(If you are applying for RSDM funds for elderly and/or persons with disabilities, you do not need to respond to the above question.)

E.

Specify the number of persons in the following categories and identify their roles:

1. Residents in your development employed by the applicant.
2. Residents in your development employed by applicant contractors.
3. Resident-owned businesses contracting with the applicant.

Also, indicate the percentage (%) of:

- (1) Applicant employees that are residents.
- (2) Applicant contractors that are resident-owned or who employ more than one PHA or Indian housing resident.
- (3) Applicant contract dollars that go to resident-owned businesses or to businesses that employ more than one PHA or Indian Housing resident.

(If you are applying for RSDM funds for elderly and/or persons with disabilities, you do not need to respond to the above question.)

F.

Name existing service providers on-site or near your targeted public or Indian housing development(s) that currently serve residents and contribute to meeting needs you have identified for the development. Assess the differential between what is provided and the level of need that you have identified over the next 3 years.

1. Service Provider/Resource: _____
(Check one) On-Site _____ Not On-Site _____
Eligible Recipients:

Extent to which Identified Needs of Targeted Development(s) are addressed by this Service Provider and type of service:

2. Service Provider/Resource: _____
(Check one) On-Site _____ Not On-Site _____
Eligible Recipients:

Extent to which Identified Needs of Targeted Development(s) are addressed by this Service Provider and type of service:

3. Service Provider/Resource: _____
(Check one) On-Site _____ Not On-Site _____
Eligible Recipients:

Extent to which Identified Needs of Targeted Development(s) are addressed by this Service Provider and type of service:

4. Service Provider/Resource: _____
(Check one) On-Site _____ Not On-Site _____
Eligible Recipients:

Extent to which Identified Needs of Targeted Development(s) are addressed by this Service Provider and type of service:

5. Service Provider/Resource: _____
(Check one) On-Site _____ Not On-Site _____
Eligible Recipients:

Extent to which Identified Needs of Targeted Development(s) are addressed by this Service Provider and type of service:

6. Service Provider/Resource: _____
(Check one) On-Site _____ Not On-Site _____
Eligible Recipients:

Extent to which Identified Needs of Targeted Development(s) are addressed by this Service Provider and type of service:

7. Service Provider/Resource: _____
(Check one) On-Site _____ Not On-Site _____
Eligible Recipients:

Extent to which Identified Needs of Targeted Development(s) are addressed by this Service Provider and type of service:

G.

Given the needs and resources identified, and the impact of welfare reform, summarize and prioritize unmet needs for family self-sufficiency or independent living for the elderly and disabled. (Family RSDM applications must focus on households affected by welfare reform.)

Priority unmet need 1

Priority unmet need 2

Priority unmet need 3

Priority unmet need 4

Priority unmet need 5

H.

Describe the goals, objectives, and program strategies that will result in the successful transition of residents from welfare to work or in the case of elderly or disabled RSDM applicants, in increased independence for proposed program participants.

**ROSS FY 1999 FUNDING
RESIDENT SERVICE DELIVERY MODELS**

TAB 4

Rating Factor 3: Soundness of Approach

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant: _____ Date: _____

Rating Factor 3: Soundness of Approach (40 points)

Describe the rationale to support your proposed approach. Include statements concerning the viability and comprehensiveness of strategies to address the needs of residents; the budget appropriateness/efficient use of grant; the rate at which you can realistically accomplish the goals of your proposed RSDM program; the soundness of your plan to evaluate the success of your proposed RSDM program at completion and during program implementation; and resident and other partnerships.

You must use the chart formats in this Tab to reflect your narrative information. Chart D lists line items. Chart E provides a detailed Budget, breaking out each activity by major cost categories and funding sources. Chart F is an Activity Plan Summary for you to identify each major activity and their dates. Chart G, Activity Breakout, for each major activity identified in Chart F is required as part of your submission.

SPECIAL CONSIDERATIONS FOR FAMILY RSDM PROGRAMS:

A) Special Concerns in Designing Activities for Resident Service Delivery Models.

In order to receive maximum selection points in Rating Factor 3(1)(a), include each of the following types of activities:

- 1) Recruitment of residents to be served. Describe subgroups in your resident population to be targeted and methods to be used to recruit participants. If you are only applying for Family RSDM funds, include data from the Resident Characteristics Chart that confirms that 51% or more of residents to be served by this program are TANF recipients or affected recipients of Food Stamps or SSI. Elderly or disabled residents may be included in the 51% if: (1) their Medicaid or Food Stamp benefits are affected by welfare reform, or (2) they will provide services such as child care or mentoring to families affected by welfare reform. The information provided must support evidence that at least 51% of residents of the proposed program are affected by welfare reform or your application will be ineligible for RSDM. (See Tab 2.)

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

SPECIAL CONSIDERATIONS FOR FAMILY RSDM PROGRAMS (continued):

- 2) Case management and counseling. Describe counseling for personal development (including, if applicable, mentoring, family counseling) and economic self-sufficiency (including, if applicable, career counseling, housing counseling, referrals to economic development activities, and child care/transportation referrals).
- 3) Economic development training. Describe job training and training residents to start and manage their own businesses.
- 4) Job development or placement services or resident business startup assistance. Describe, if applicable, employer linkage, job placement, providing startup capital or contracts for resident owned businesses, and/or assisting residents in establishing credit unions. To receive points under subfactor (1)(b), you must commit to hire 15% of residents or contract with 15% of resident business, consistent with the goals of Section 3. To qualify for these points, you must describe in this section the number of jobs or contracts you will provide and include in a letter signed by applicant's Executive Director or other legally authorized official or a resolution from the Board of Directors committing to hire or contract with the specified number of residents. Indicate in this section where this letter can be found.
- 5) Child care. Describe child care services for parents who are working, looking for work, or enrolled in a training, education, or other support program.
- 6) Transportation. Describe the extent to which work training, supportive services or work placement includes location(s) requiring transportation. Transportation would generally be required to any work site located outside the development or on-site but far from living units.

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

SPECIAL CONSIDERATIONS FOR ELDERLY OR DISABLED RSDM PROGRAMS

In order for an application for elderly and disabled RSDM to receive maximum points in Rating Factor 3(a)(ii), the proposed program must be located in a community facility, be available on a 12-hour basis or as needed, and include activities in the following categories:

- 1) Case management,
- 2) Health and personal care,
- 3) Congregate services, and
- 4) Transportation.

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant Name: _____ Date: _____

Rating Factor 3(1): Viability and Comprehensiveness of the Strategies to Address the Needs of Residents (21 points)

Your application will be scored on this subfactor based on the viability and comprehensiveness of strategies to address the needs of residents.

Rating Factor 3(1)(a): Services (18 points for Family RSDM applicants and 21 points for Elderly/Disabled RSDM applicants)

Include a narrative discussion in this section, to comprehensively describe all program activities (including physical improvements) - whether paid for by RSDM grant funds, or other sources and their relationship with each other. The description of each activity must include: objectives, beginning and completion dates, types of services, staff time, and dollar amounts over the 36 month time period. Activities, timetables, and activity milestones should be designed to sequentially and effectively lead towards accomplishment of the overall program objectives.

Each applicant requesting physical improvements should submit a description of the renovation or conversion to be conducted along with a budget and timetable for those activities. Each applicant must demonstrate a firm commitment of assistance from one or more sources ensuring that supportive services will be provided for not less than 2 years following the completion of renovation, conversion, or repair activities funded under this NOFA.

If renovation, conversion, or repair is done off-site, the applicant must provide documentation that it has control of the proposed property for not less than 2 years and preferably for 4 years or more. Control can be evidenced through a lease agreement, ownership documentation or other appropriate documentation.

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant Name: _____ Date: _____

Rating Factor 3(1)(b): Resident Contracting and Employment (Family RSDM only – 3 points)

This rating subfactor applies only to Family RSDM submissions. Describe below how residents will achieve self-sufficiency through your contracting with resident-owned business and through resident employment. Describe the number of jobs or contract opportunities to be created. Describe your training process. A high score will require documentation – that is, a letter or resolution describing you or your partners' commitment to hire at least 15% of residents or contract with at least 15% of residents.

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant Name:_____ Date:_____

Rating Factor 3(2): Budget Appropriateness/Efficient Use of Grant (5 points)

Your application will be scored for this subfactor based on the following:

- (a) Detailed budget break-out. Complete Chart D, Summary Budget Information, for your proposed activities. Complete Chart E to provide a detailed budget for each budget category in your completed Form SF-424A.
- (b) Reasonable administrative costs: the extent to which administrative costs are at or below the 20% administrative cost ceiling.
- (c) Budget efficiency: the extent to which your requests funds is commensurate with the level of effort necessary to accomplish the proposed goals and objectives, and the extent to which the estimated costs to the government are reasonable in relationship to the anticipated results.

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Chart D RSDM SUMMARY BUDGET INFORMATION FOR HUD AUTOMATED TRACKING

Applicant Name: _____ Date: _____

Please list specific budget amounts for each line item. These budget line items and amounts will be programmed into HUD's Line of Credit Control System (LOCCS) for designating and tracking uses of grant drawdowns. Line item amounts in Chart D must be consistent with the more detailed budget in Chart E.

BUDGET LINE ITEM		AMOUNT
2005	Program Coordinator	_____
2010	Physical Improvements	_____
2020	Entrepreneur Business Development	_____
2021	Establishing A Revolving Loan Fund	_____
2022	Developing a Credit Union	_____
2030	Business Development	_____
2031	Develop Business Plan	_____
2032	Conduct Market Analysis	_____
2033	Secure Licensing, Insurance, Bonding	_____
2034	Training Related to Resident Owned Business	_____
2035	Establishment of Resident Managed Business Development	_____
2040	Resident Organization Development Activities	_____
2041	Organize Community	_____
2042	Operating Procedures	_____
2043	Develop MOU	_____
2044	Develop Plan for Technical Assistance	_____
2045	Consultant Contracts	_____
2046	Self Sufficiency Programs	_____

SUMMARY BUDGET INFORMATION (continued)

2050	Resident Management	_____
2051	Conduct Feasibility Study	_____
2052	Secure Training/Skills/Expertise	_____
2053	Develop MOU	_____
2054	Consultant	_____
2055	Secure T/A to Draft Contract	_____
2056	Negotiate Contract with PHA	_____
2057	Conduct Resident Training Preparation	_____
2060	Self Sufficiency Program	_____
2061	Program Coordinator	_____
2062	Physical Improvements	_____
2063	Employment and Job Readiness	_____
2064	Job Training	_____
2065	Management Related Employment Training	_____
2066	Vocational Training	_____
2067	Technical Assistance	_____
2070	Family Supportive Services	_____
2870	Elderly Supportive Services	_____
9100	Travel Costs	_____
9200	Other Resident Costs (Stipends, Reimbursements)	_____
9300	Contract Administrator	_____
9400	Administrative and Other Costs	_____

Sample Chart E: Detailed RSDM Budget

#	ACTIVITY	BUDGET	ITEM	RSDM GRANT FUNDS	PARTNER FUNDS	TOTAL FUNDS	
1	Rehab Community Center - No RSDM funds to be used.	RSDM COSTS		Housing Authority Personnel	\$0		
			Housing Authority Admin & Other		\$0		
			Contractor(s)		\$0		
			Subgrantee.		\$0		
				NON-RSDM COSTS			Housing Authority
	Partners:			\$0			
	TOTAL COSTS			\$0	\$20,000	\$20,000	
2	Outreach, Recruitment and Survey	RSDM COSTS		Housing Authority Personnel	\$5,000		
			Housing Authority Admin & Other		\$5,000		
			Contractor(s)		\$0		
			Subgrantee.		\$0		
				NON-RSDM COSTS			Housing Authority
	Partners: Ourtown Comm Coll			\$10,000			
	TOTAL COSTS			\$10,000	\$10,000	\$20,000	
3	Counseling (Family, Substance Abuse and Youth Mentoring)	RSDM COSTS		Housing Authority Personnel	\$10,000		
			Housing Authority Admin & Other		\$10,000		
			Contractor(s)		\$0		
			Subgrantee		\$0		
				NON-RSDM COSTS			Housing Authority
	Partners: Family Counseling Serv			\$10,000			
	Ourtown State College			\$10,000			
TOTAL COSTS				\$20,000	\$20,000	\$40,000	
4	Literacy Training	RSDM COSTS		Housing Authority Personnel	\$10,000		
			Housing Authority Admin & Other		\$10,000		
			Contractor(s)		\$0		
			Ourtown Comm Coll Subgrantee		\$160,000		
		NON-RSDM COSTS		Housing Authority	\$0		
			Partner: Ourtown Comm Coll		\$40,000		
			TOTAL COSTS		\$180,000		\$40,000

Sample Chart E: Detailed RSDM Budget (continued)

5	Entrepreneurship Training- Resident Management and Maintenance	RSDM COSTS		Housing Authority Personnel	\$20,000		
			Housing Authority Admin & Other		\$20,000		
			Contractor(s)		\$155,000		
			Subgrantee		\$0		
		NON-RSDM COSTS		Housing Authority		\$0	
			Partner: Dept of Soc Serv/TANF			\$20,000	
			Private Industry Council			\$20,000	
		TOTAL COSTS			\$195,000	\$40,000	
6	Health Technician Certificate Training	RSDM COSTS		Housing Authority Personnel	\$15,000		
			Housing Authority Admin & Other		\$15,000		
			Contractor(s)		\$0		
			Ourtown Comm Coll Subgrantee		\$160,000		
		NON-RSDM COSTS		Housing Authority		\$0	
			Partner: Ourtown Comm Coll			\$20,000	
TOTAL COSTS			\$190,000	\$20,000	\$210,000		
7	Job Placement (includes employer incentives)	RSDM COSTS		Housing Authority Personnel	\$2,000		
			Housing Authority Admin & Other		\$50,000		
			Contractor(s)		\$0		
			Subgrantee		\$0		
		NON-RSDM COSTS		Housing Authority		\$0	
			Partners: Private Industry Council			\$5,000	
			Samoyed Trust			\$5,000	
			Partner: Ourtown Comm Coll			\$0	
TOTAL COSTS			\$52,000	\$10,000	\$62,000		

Sample Chart E: Detailed RSDM Budget (continued)

8	Transportation	RSDM COSTS		Housing Authority Personnel	\$5,000	
			Housing Authority Admin & Other		\$10,000	
			Contractor(s)		\$0	
			Subgrantee		\$0	
		NON-RSDM COSTS		Housing Authority		\$0
			Partner: Dept of Soc Serv/TANF			\$15,000
			University Hospital			\$15,000
		TOTAL COSTS				\$15,000
9	Child Care	RSDM COSTS		Housing Authority Personnel	\$5,000	
			Housing Authority Admin & Other		\$10,000	
			Contractor(s)		\$140,000	
			Subgrantee		\$0	
		NON-RSDM COSTS		Housing Authority		\$0
			Partner: Dept of Soc Serv/TANF			\$10,000
		TOTAL COSTS				\$155,000

Sample Chart E: Detailed RSDM Budget (continued)

10	Computer Center	RSDM COSTS		Housing Authority Personnel	\$20,000		
			Housing Authority Admin & Other		\$15,000		
			Contractor(s)				
			Subgrantee				
		NON-RSDM COSTS		Housing Authority		\$0	
			Partner: Acquista Corp.			\$10,000	
		TOTAL COSTS			\$35,000	\$10,000	
11	Closeout, Audit and Evaluation	RSDM COSTS		Housing Authority Personnel	\$3,000		
			Housing Authority Admin & Other		\$5,000		
			Contractor #1		\$2,500		
			Contractor #2		\$2,500		
			Ourtown State Univ. Subgrantee		\$20,000		
			NON-RSDM COSTS		Housing Authority		
	Partner: Ourtown State Univ.		\$11,250				
TOTAL COSTS			\$33,000	\$11,250	\$44,250		
TOTAL RSDM BUDGET							
			BUDGET ITEM	RSDM GRANT COST	NON RSDM COST	TOTAL COST	
RSDM COSTS		Housing Authority Personnel		\$95,000			
		Housing Authority Admin & Other		\$150,000			
		Contractors		\$300,000			
		Subrecipients		\$340,000			
		NON-RSDM COSTS		Housing Authority			
	Partners		\$20,000				
TOTAL COSTS			\$885,000	\$221,250	\$1,106,250		

Chart E: Detailed RSDM Budget

#	ACTIVITY	BUDGET ITEM		RSDM GRANT FUNDS	PARTNER FUNDS	TOTAL FUNDS
1		RSDM COSTS		Applicant Personnel		
			Applicant Admin & Other			
			Contractor(s)			
			Subgrantee			
		NON-RSDM COSTS		Applicant		
			Partners:			
		TOTAL COSTS				
2		RSDM COSTS		Applicant Personnel		
			Applicant Admin & Other			
			Contractor(s)			
			Subgrantee			
		NON-RSDM COSTS		Applicant		
			Partners:			
		TOTAL COSTS				
3		RSDM COSTS		Applicant Personnel		
			Applicant Admin & Other			
			Contractor(s)			
			Subgrantee			
		NON-RSDM COSTS		Applicant		
			Partners:			
		TOTAL COSTS				

Chart E: Detailed RSDM Budget (continued)

#	ACTIVITY	BUDGET ITEM		RSDM GRANT FUNDS	PARTNER FUNDS	TOTAL FUNDS
4		RSDM COSTS		Applicant Personnel		
			Applicant Admin & Other			
			Contractor(s)			
			Subgrantee			
		NON-RSDM COSTS		Applicant		
			Partners:			
		TOTAL COSTS				
5		RSDM COSTS		Applicant Personnel		
			Applicant Admin & Other			
			Contractor(s)			
			Subgrantee			
		NON-RSDM COSTS		Applicant		
			Partners:			
		TOTAL COSTS				
6		RSDM COSTS		Applicant Personnel		
			Applicant Admin & Other			
			Contractor(s)			
			Subgrantee			
		NON-RSDM COSTS		Applicant		
			Partners:			
		TOTAL COSTS				

Chart E: Detailed RSDM Budget (continued)

#	ACTIVITY	BUDGET ITEM		RSDM GRANT FUNDS	PARTNER FUNDS	TOTAL FUNDS
7		RSDM COSTS		Applicant Personnel		
			Applicant Admin & Other			
			Contractor(s)			
			Subgrantee			
		NON-RSDM COSTS		Applicant		
			Partners:			
		TOTAL COSTS				
8		RSDM COSTS		Applicant Personnel		
			Applicant Admin & Other			
			Contractor(s)			
			Subgrantee			
		NON-RSDM COSTS		Applicant		
			Partners:			
		TOTAL COSTS				
9		RSDM COSTS		Applicant Personnel		
			Applicant Admin & Other			
			Contractor(s)			
			Subgrantee			
		NON-RSDM COSTS		Applicant		
			Partners:			
		TOTAL COSTS				

Chart E: Detailed RSDM Budget (continued)

#	ACTIVITY	BUDGET ITEM		RSDM GRANT FUNDS	PARTNER FUNDS	TOTAL FUNDS
10		RSDM COSTS		Applicant Personnel		
			Applicant Admin & Other			
			Contractor(s)			
			Subgrantee			
		NON-RSDM COSTS		Applicant		
			Partners:			
		TOTAL COSTS				
11		RSDM COSTS		Applicant Personnel		
			Applicant Admin & Other			
			Contractor(s)			
			Subgrantee			
		NON-RSDM COSTS		Applicant		
			Partners:			
#	ACTIVITY	BUDGET ITEM		RSDM GRANT FUNDS	PARTNER FUNDS	TOTAL FUNDS
10		RSDM COSTS		Applicant Personnel		
		TOTAL COSTS				
		TOTAL RSDM BUDGET				
			BUDGET ITEM	RSDM GRANT COST	NON RSDM COST	TOTAL COST
		RSDM COSTS		Applicant Personnel		
			Applicant Admin & Other			
			Contractor(s)			
			Subgrantee(s)			
		NON-RSDM COSTS		Applicant		
			Partners			
		TOTAL COSTS				

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant Name: _____ Date: _____

Rating Factor 3(3): Reasonableness of the Timetable (2 points for Family applicants and 4 points for elderly/disabled applicants)

The score in this factor will be based on the rate of response that you can realistically accomplish the goals of the proposed RSDM program. To receive a high score, you must demonstrate that your program will make substantial progress within the first six months after grant execution including putting staff in place, finalizing partnership arrangements, completing the development of requests for proposals and achieving other milestones that are prerequisites for implementation of the program. In addition you must demonstrate that your proposed timetable for all components of your proposed program is reasonable considering the size of the grant and your activities and that you can accomplish your objectives within the 36-month time limit. More points are awarded in the Elderly/Disabled RSDM application to balance other selections of the rating criteria where points are not applicable to Elderly/Disabled applicants.

Also, complete Chart F, Activity Plan Summary, and a separate Chart G, Activity Breakout, for each activity specified in Chart F.

SAMPLE – Chart F

RSDM ACTIVITY PLAN SUMMARY

Applicant Name: _____

Date: _____

#	PHASE/ACTIVITY	START/END DATE	MILESTONES	PARTICIPATING PARTNERS
I.	Outreach, Recruitment and Assessment	11/1/97 - 3/31/99	To recruit 240 TANF families for employment training and placement.	Resident Assn. Ourtown Comm. College
2.	Rehabilitation of Community Center	11/1/97 - 3/1/98	To render an abandoned building into a functional focus for welfare-to-work.	Housing Authority
3.	Job Readiness and Retention Lifeskills Training-counseling, mentoring and referral to support services.	3/1/98 - 5/31/00	To address pre- and post-employment personal and family growth needs identified by 150 participants.	Family Counseling Services, Ourtown Comm Coll. and Residents Assn.
4.	Literacy Training	3/1/98 - 7/31/99	To provide 120 residents with math and verbal skills needed for successful job or business training.	Ourtown School System, Ourtown Community College
5.	Health Technician Training	5/98 - 11/99 and 8/1/98 to 5/31/00	To train 120 participants for full-time employment at family sustaining wages.	Ourtown Community College, Ourtown Hospital
6.	Entrepreneurship Training - Housing maintenance and management	5/98 - 11/99 and 8/1/98 to 5/31/00	To train 120 participants for full-time self-employment at family sustaining wages.	Private Industry Council (PIC), Dept. of Soc Service\TANF
7.	Job Placement/ Business Startup for trainees	11/1/98 - 5/1/00	To move an estimated 200 trainee graduates to full-time jobs or businesses at sustaining incomes.	PIC, Ourtown Hospital
8.	Transportation	3/1/98 - 5/31/00	To provide transportation needed to offsite training and work opportunities	Dept. of Social Services/ TANF, Ourtown Hospital
9.	Child Care	3/1/98 - 5/31/00	To address preschool (0-5 yrs) and before/after school (6- 12 yrs) child care needs of program participants.	Dept. of Social Services/ TANF, Headstart
10.	Computer Center	3/1/98 - 5/31/00	To use part of the comm- unity center as a computer center for training and other resident uses	Erol's (internet access), Local Industry Inc (com- puters, software)

Overall Program Goal: To enable 200 residents to move from welfare to full-time employment at sustaining incomes.

Chart F
RSDM ACTIVITY/PROGRAM PLAN SUMMARY

Applicant Name: _____

Date: _____

	Phase/Activity	Start/End Date	Milestones	Participating Partner/Activity
1				
2				
3				
4				
5				
6				

Overall Program Objectives: _____

SAMPLE – Chart G
RSDM ACTIVITY BREAKOUT FOR ACTIVITY 1
for Phase / Activity: Outreach, Recruitment, and Assessment

#	ACTIVITY/TASK	START/ END DATE	ORGANIZATIONS INVOLVED/ ROLES
A	Publicity/outreach for Welfare-to-Work Program- Production, door-to-door delivery and posting of brochures and other notices of welfare-to-work program opportunities and of upcoming informational meetings.	2 cycles 11/1/97- 1/1/98 11/1/98- 1/1/99	Housing Authority Only
B	All Resident Meetings- Describe impact of welfare reform on resident lives, opportunities, requirements and schedule for RSDM Welfare-to-Work Program.	1/3/98- 1/10/98 1/3/99- 1/10/99	Housing Authority
C	Follow-up Interviews, Resident sign-up and Housing Authority development of list of 240 program participants.	1/11/98- 2/1/98 1/11/99 2/1/99	Housing Authority
D	Assessment- Interview and assess participant interests, skills and training needs	2/98- 3/98 2/99- 3/99	Ourtown Community College, Social Work and Management Departments will assist Housing Authority
E	Establish or coordinate with Welfare Department for individual plans for counseling/ mentoring, literacy training, job or business training, placement, day care, transportation, and any appropriate referrals.	3/98 3/99	Ourtown Community College, Social Work and Management Departments will assist Housing Authority
F			
G			

Activity Milestone: To recruit 40 TANF families for employment training/placement

Chart G
RSDM ACTIVITY BREAKOUT

for Phase/Activity _____ **Applicant Name:** _____ **Date:** _____

	ACTIVITY/TASK	START DATE END DATE	ORGANIZATIONS INVOLVED/ROLES
A			
B			
C			
D			
E			
F			

Activity Milestone: _____

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant Name: _____

Date: _____

Rating Factor 3(4): Program Assessment (3 points)

Your score in this factor will be based on the soundness of your plan to evaluate the success of your proposed RSDM program both at the completion of your program and during program implementation. At a minimum, you must track the extent to which goals and objectives of your proposed program are achieved. HUD will rate you more favorably if you can track specific measurable achievements for the use of program funds, such as number of residents employed, salary scales of jobs obtained, persons removed from welfare rolls 12 months or longer, number of elderly or disabled residents receiving supportive services, and number of persons receiving certificates for successful completion of training in careers such as computer technology. To receive a high score, you must provide a comprehensive description of the program assessment system, including: identification of staff designated for program quality control, performance measures, automated systems for collecting program data, and your timetable for undertaking assessment activities.

**ROSS FY 1999 FUNDING
RESIDENT SERVICE DELIVERY MODELS**

Applicant Name: _____

Date: _____

Rating Factor 3(5): Resident and Other Partnerships (9 points for family RSDM applicants and 7 points for Elderly/Disabled applicants)

- (a) **Resident Involvement in RSDM Activities (3 points for Family RSDM applicants and 4 points for Elderly/Disabled RSDM applicants).** Describe the extent of proposed resident involvement in developing your proposed RSDM program. To receive a high score for this subfactor, you must provide documentation that describes the involvement of residents in the planning phase of this program, and a commitment to provide continued involvement in the implementation of your proposed activities. To receive the maximum number of points, applicants must include a Memorandum of Understanding (MOU) or other written agreement with PHA, Tribes and TDHEs, and RAs involved as appropriate. (Include relevant MOUs or other written agreements after the narrative that addresses this rating subfactor.)

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant Name: _____

Date: _____

Rating Factor 3(5) (continued):

- (b) Other Partnerships (3 points). The score in this factor will be based on the successful integration of partners into implementation of the proposed RSDM program. In order to receive a high score, you must provide a signed Memorandum of Understanding or other equivalent signed documentation that delineates the roles and responsibilities of each of the parties in the program and the benefits they will receive. (Include relevant MOUs or other equivalent agreements following the narrative under this rating subfactor.)

Provide a narrative in this section that includes information and is organized as follows:

- 1) Describe the division of responsibilities between you organization and its partners and how you will coordinate with its partners to ensure program success and fulfillment of all partner commitments -- consistent with the more detailed description of the RSDM program management structure; and
- 2) Describe the extent to which the partnership as a whole addresses a broader range of resident needs; and
- 3) Describe the extent to which the addition of the partners provide the ability to meet needs more cost effectively or efficiently than the applicant or its partners could achieve individually without forming the partnership.

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant Name: _____

Date: _____

Rating Factor 3(5) (continued):

- (c) Overall Relationship Coordination **(3 points – Family RSDM applicants only)**. For your Family RSDM application, your score in this factor will be based on the extent of coordination between your proposed RSDM program and any existing or proposed programs within your jurisdiction. To receive a high score, you must provide a Memorandum of Understanding or other equivalent signed document that describes collaboration between your staff and residents on all of the specific components related to the work plan of both the proposed or current RSDM programs. If there are no existing and no proposed programs within your jurisdiction, the score for this factor will be zero. Elderly/Disabled RSDM applications will not be scored on this criterion. (Include the relevant MOUs or equivalent signed documents following the narrative under this rating subfactor.)

ROSS FY 1999 FUNDING

**RESIDENT SERVICE DELIVERY
MODELS**

TAB 5

Rating Factor 4:

Leveraging Resources

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant Name: _____ Date: _____

Rating Factor 4: Leveraging Resources (10 Points)

This factor addresses your ability to secure community resources to be combined with HUD program resources to achieve your proposed RSDM program's purposes. HUD will consider the extent to which you have partnered with other entities to secure additional resources to increase the effectiveness of your proposed program activities. Your budget (in Tab 4) must reflect leveraged resources. HUD's rating under this factor will be based on firm commitments of funds or the value of personnel, facilities, equipment, or other in-kind resources. "Firmly committed" means there is a written agreement to provide the resources. The agreement may be contingent on your receiving RSDM funding. (See NOFA, Section V(I), Rating Factor 4.)

Provide detailed narrative information on each partner and their contribution(s). Also, complete Chart H, Program Resources.

(1) Specify the roles and responsibilities of each partner relative to the proposed RSDM program. (Partners that will administer RSDM funds should be designated "subgrantees.")

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Leveraging Resources (continued)

(2) Specify the amount and type of resources and services that your partner firmly commits to contribute to your grant program, including your supplemental grant funds with a cash and/or in-kind contribution match of not less than 25% of the grant amount. In valuing volunteer time or services and donated items, use the following guidelines:

(a) The value of volunteer time and services shall be computed at a rate of \$6.00 per hour, except that the value of volunteer time and service involving professional and other special skills shall be computed on the basis of the usual and customary hourly rate paid for the service in the community where the RSDM activity is located. (See Section V(G)(4).)

(b) The value of any donated material equipment, building, or lease shall be computed based on the fair market value at time of donation. Such value shall be documented by bills of sales, advertised prices, appraisals, or other information for comparable property similarly situated. The documentation shall be not more than 1 year old and taken from the community where the item or RSDM activity is located.

Chart H RSDM Program Resources

Applicant Name: _____

Date: _____

Name of Provider/Partner	Activity	Type of Resource	Dollar Value of Resource	Page No. of MOU/MOA	HUD use Only
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
Total of Provider/Partner Contributions			\$		
Requested RSDM Grant Funds			\$		
TOTAL PROGRAM RESOURCES			\$		

ROSS FY 1999 FUNDING

**RESIDENT SERVICE DELIVERY
MODELS**

TAB 6

Rating Factor 5:

Comprehensiveness and Coordination

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant Name: _____ Date: _____

Rating Factor 5: Comprehensiveness and Coordination (10 points)

This factor addresses the extent to which your program reflects a coordinated, community-based process of identifying needs and building a system to address the needs by using available HUD funding resources and other resources available to the community.

Rating Factor 5(1): Coordination with Consolidated Plan (2 points for Family RSDM applicants and 6 points for Elderly/Disabled RSDM applicants).

Provide a narrative that demonstrates you have reviewed the community's Consolidated Plan or Indian Housing Plan, and/or Analysis of Impediments to Fair Housing Choice. Describe how your proposed activities address the priorities, needs, goals, or objectives in those documents, or otherwise substantially further fair housing choice in the community.

Complete the following Certificate of Consistency with the Consolidated Plan.

**CERTIFICATION OF CONSISTENCY WITH THE
CONSOLIDATED PLAN**

**U.S. DEPARTMENT OF HOUSING
AND URBAN DEVELOPMENT**

I certify that the proposed activities/projects in the application are consistent with the jurisdiction's current, approved Consolidated Plan.

Applicant Name: _____

Project Name: _____

Location of the Project: _____

Name of the Federal Program(s) to
which the applicant is applying:

Name of Certifying Jurisdiction:

Title:

Signature:

Date:

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant Name: _____ Date: _____

Rating Factor 5(2): Coordination with State or Tribal Welfare Plan/Community Consolidated Plan/Other Activities (4 points – Family RSDM applicants only).

Your Family RSDM applications must summarize the State or Tribal welfare plan, describe below how your proposed program is consistent with that plan, and complete the following Certification of Consistency with the Consolidated Plan in this Tab. You should demonstrate that you have reviewed your community's Consolidated Plan and Analysis of Impediments to Fair Housing Choice, if one has been conducted, and has proposed activities that address the priorities, needs, goals, and objectives in those documents; or substantially further fair housing choice in the community.

For Tribes/TDHEs, the Indian Housing Plan would be the document to review for this information. To the extent possible, you should also demonstrate that, in carrying out program activities, you will develop linkages with: other HUD-funded program activities proposed or ongoing in the community; or other State, Federal, or locally funded activities proposed or ongoing in the community, which taken as a whole, support and sustain a comprehensive system to address needs.

**ROSS FY 1999 FUNDING
RESIDENT SERVICE DELIVERY MODELS**

Applicant Name: _____ Date: _____

Rating Factors 5(3): Coordination with other Activities: (4 points for Family RSDM applicants and 6 points for Elderly/Disabled RSDM applicants).

Describe below the extent to which the applicant will develop linkages with other HUD-funded activities or with other Federal, State, tribal or local activities proposed or on-going in the community that, taken as a whole, support and sustain a comprehensive system to address the needs. Indicate the extent to which RSDM funded activities will become part of a comprehensive system to address community needs.

ROSS FY 1999 FUNDING

**RESIDENT SERVICE DELIVERY
MODELS**

TAB 7

Bonus Points for EZ/EC

ROSS FY 1999 FUNDING RESIDENT SERVICE DELIVERY MODELS

Applicant Name: _____ Date: _____

Bonus Points: Location of RSDM Activities in an Enterprise Community or Empowerment Zone

You will receive two bonus points if: (1) your eligible activities or projects are located in high performing federally designated Empowerment Zones, Enterprise Communities, or Urban Enhanced Enterprise Communities; (2) your eligible activities serve EZ/EC residents; and (3) your eligible activities are certified to be consistent with the Strategic Plan of the EZ or EC.

If any of the RSDM activities will be located in or will serve the population of a high performing federally designated Empowerment Zone, Enterprise Community, or Urban Enhanced Enterprise Community, describe the extent to which the activities will be coordinated with the Empowerment Zone or Enterprise Community Strategic Plan. Complete the Certification of Consistency with the Consolidated Plan in Tab 7 and the Certification of Consistency with EZ/EC in this Tab. A list of EZ/EC contacts is listed in this Tab also. (See NOFA, Section V(I).)

**CERTIFICATION OF CONSISTENCY WITH THE
EZ/EC STRATEGIC PLAN**

**U.S. DEPARTMENT OF HOUSING
AND URBAN DEVELOPMENT**

I certify that the proposed activities/projects in this application are consistent with the Strategic Plan of a Federally-designated Empowerment Zone (EZ) and/or Enterprise Community (EC).

Type or clearly print the following information:

Applicant Name: _____

Name of the Federal Program to
which the applicant is applying: _____

Name of EZ/EC: _____

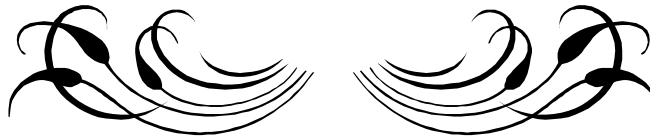
I further certify that the proposed activities/projects will be located within the EZ/EC and serves EZ/EC residents. (2 bonus points)

Name of the Official Authorized
to Certify the EZ/EC: _____

Title: _____

Signature: _____

Date: _____



EZ/EC MAIN CONTACT LIST
High Performers as of August, 1999

Name & City	Phone & Fax Numbers
EMPOWERMENT ZONES (26)	
CA, Los Angeles	
Robert Perez	213-485-5725 (Phone)
City of Los Angeles	213-237-0551 (Fax)
Community Development Department	
215 West 6th Street, Third Floor	
Los Angeles, CA 90014	
David Eder	
City of Los Angeles	213-485-2956 (Phone)
Community Development Department	213-237-0890 (Fax)
215 West 6th Street, Third Floor	
Los Angeles, CA 90014	
CA, Santa Ana, (EZ)	
Ms. Cindy Nelson	714-647-5360 (Phone)
Executive Director	714-647-6549 (Fax)
Community Devel. Agency	
20 Civic Center Plaza - M-25	
Santa Ana, CA 92702	
CT, New Haven (EZ - EC)	
Ms. Diana Edmonds	203-946-7727(Phone)
City of New Haven	203-946-8049 (Fax)
200 Orange Street, 5th Floor	
New Haven, CT 06510	
FL, Miami/ Dade County (EZ - EC)	
Mr. Tony E. Crapp, Sr.	305-375-3431 (Phone)
Office of Economic Development	305-375-3428 (Fax)
140 West Flagler, Suite 1000	
Miami, FL 33130-1561	

GA, Atlanta

Mr. Joseph Reid
Exec. Director
Atlanta EZ Corporation
675 Ponce De Leon Avenue
Second Floor - Suite 2100
Atlanta, GA 30308
www.atlantapd.org/ez/ezfact.html

404-853-7610 (Phone)
404-853-7315 (Fax)

IL, Chicago

Mr. Ronald Carter, Jr.
City of Chicago
20 North Clark Street, 28th Floor
Chicago, IL 60602

312-744-9623 (Phone)
312-744-9696 (Fax)

IN, Gary, E. Chicago (EZ)

Mr. Taghi Arshani
Office of Planning & Community Development
475 Broadway, Suite 318
Gary, IN 46402

219-881-5075 (Phone)
219-881-5085 (Fax)

KY, Kentucky Highlands EZ – Clinton, Jackson, Wayne Counties

Jerry Rickett
Kentucky Highlands Investment Corporation
362 Old Whitley Rd.
London,, KY 40741

606-864-5175 (Phone)
606-864-5194 (Fax)

MD, Baltimore

Ms. Diane Bell
Empower Baltimore Management Corporation
111 S. Calvert Street, Suite 1550
Baltimore, MD 21202

410-783-4400 (Phone)
410-783-0526 (Fax)

MA, Boston (EZ-EEC)

Ms. Juanita Wade
Chief of Human Services
Suite 603
Boston City Hall
Boston, MA 02201

617-635-2953 (Phone)
617-635-3496 (Fax)

Mr. Reginald Nunnally
Boston Business Assistance Center
Boston Empowerment Zone
20 Hampden Street
Boston, MA 02119

617-445-3413 (Phone)
617-445-5675 (Fax)

MI, Detroit

Mr. Paul Bernard
Executive Director
City of Detroit Planning and Development
2300 Cadillac Tower Building
Detroit, MI 48226
www.ezsis.org/commune/detroit/ez/index.htm

313-224-6389 (Phone)
313-224-1629 (Fax)

Denise Gray
Executive Director
Detroit Empowerment Zone Corporation
1 Ford Place, Suite 2D
Detroit, MI 48202

313-872-8050 (Phone)
313-872-8002 (Fax)

MN, Minneapolis (EZ - EC)

Mr. Ken Brunsvold
Office of Grants & Special Project
350 South Fifth Street
City Hall, Room 200
Minneapolis, MN 55415

612-673-2348 (Phone)
612-673-2728 (Fax)

MO, St. Louis/E. St. Louis, IL (EZ-EC)

Mr. Chad Cooper
St. Louis Development Corporation
105 Locust Street, Ste. 1200
St. Louis, MO 63101
st.louis.missouri.org./enterprise/index.html

314-622-3400 (Phone)
314-231-2341 (Fax)

IL, East St. Louis (EC ONLY)

Mr. Percy Harris
City of East St. Louis
301 River Park Dr.
East St. Louis, IL 62201

618-482-6642 (Phone)
618-482-6648 (Fax)

NJ, Cumberland CO. (EZ)

Mr. Stephen Kehs
Executive Director
Cumberland County Dept. of Planning
and Development
800 E. Commerce Street
Bridgeton, NJ 08302

609-453-2175 (Phone)
609-453-9138 (Fax)

New York, NY (Main Contact)

Mr. James Ilaco
Special Counsel and Corporate Secretary
New York Empowerment Zone Corporation
633 3rd Avenue
New York, NY 10017

212-803-3240 (Phone)
212-803-3294 (Fax)

NY, New York (Bronx)

Mr. Jose Ithier
Bronx Overall Economic Development Corporation
198 East 161st Street
Second Floor
Bronx, NY 10451

718-590-3549 (Phone)
718-590-3499 (Fax)

NY, New York (Upper Manhattan)

Ms. Deborah Wright, Director
Upper Manhattan Empowerment Zone
Development Corporation
290 Lenox Avenue, 3rd Flr.
New York, NY 10027

212-410-0030 (Phone)
212-410-9616 (Fax)

OH, Cincinnati (EZ)

Mr. Timothy Sharp
City Hall
801 Plum Street, Room 104
Cincinnati, OH 45202

513-352-2457 (Phone)
513-352-2458/or
513-352-5357 (Fax)

OH, Cleveland

Ms. Yvette Mosby Director
Cleveland Empowerment Zone
601 Lakeside Avenue
City Hall, Room 335
Cleveland, OH 44114

216-664-3083 (Phone)
216-420-8522 (Fax)

OH, Columbus (EZ-EC)

Mr. John Beard
Columbus Compact Corporation
815 East Mound Street
Suite 108
Columbus, OH 43205
www.iwaynet.net/~ccc/

614-251-0926 (Phone)
614-251-2243 (Fax)

OH, Columbus

Mr. Patrick Grady
Economic Development Administrator
99 North Front Street
Columbus, OH 43215

614-645-7574 (Phone)
614-645-7855 (Fax)

PA, Philadelphia /NJ, Camden

Eva Gladstein
Executive Director
City of Philadelphia
1515 Arch Street, 1 Parkway, 9th Flr.
Philadelphia, PA 19103
www.phila.gov/agencies/empower/emzone.html

215-683-0462 (Phone)
215-683-0493 (Fax)

Mr. Richard Cummings
Chairperson
Camden Empowerment Zone Corporation
412 North Second Street
Camden, NJ 08104

609-541-2836 (Phone)
609-541-8457 (Fax)

Mr. Brian Finnie
City of Camden Empowerment Zone
Corp.
800 Hudson Square, Suite 300
Camden, NJ 08102

609-365-0300 (Phone)
609-365-1058 (Fax)

SC, Sumter, Columbia (EZ)

Ms. Leona Plough
Assistant City Manager
City of Columbia
Dept. of Community Service
1225 Laurel Street
Columbia, SC 29201

803-733-8313 (Phone)
803-733-8312 (Fax)

TN, Knoxville (EZ)

Ms. Jeanette Kelleher
Community Development Administrator
City/County Building
400 Main Street, Room 514
Knoxville, TN 37902

423-215-2120 (Phone)
423-215-2962 (Fax)

TX, Rio Grande Valley EZ (Cameron, Hidalgo, Starr, Willacy Counties)

Bonnie Gonzalez
Rio Grande Valley Empowerment Zone
301 S. Texas
Mercedes, TX 78570

210-514-4000 (Phone)
210-514-4007 (Fax)

TX, El Paso (EZ-EC)

Ms. Deborah G. Hamlyn
City of El Paso
#2 Civic Center Plaza, 9th Floor
El Paso, TX 79901-1196

915-541-4643 (Phone)
915-541-4370 (Fax)

VA, Norfolk/Portsmouth (EZ-EC)

Ms. Eleanor R. Bradshaw
Norfolk Works
201 Granby Street, Ste. 100A
Norfolk, VA 23510

757-624-8650 (Phone)
757-622-4623 (Fax)

WV, Huntington/Ironton, OH (EZ-EC)

Ms. Cathy Burns
Community Development and Planning
800 Fifth Avenue, Suite 14
P.O. Box 1659
Huntington, WV 25717

304-696-4486 (Phone)
304-696-4465 (Fax)

ENHANCED ENTERPRISE COMMUNITIES (4)

CA, Oakland

Mr. William Claggett

Executive Director

510-238-3303 (Phone)

Kathy Kessler, Spec. Assistant

510-238-6538 (Fax)

Community & Economic Devel. Agency

City of Oakland

250 Frank H. Ogawa Plaza, Ste. 3330

Oakland, CA 94612-2032

Mr. Lonnie Carter

Community & Economic Devel. Agency

City of Oakland

510-238-3716 (Phone)

250 Frank H. Ogawa Plaza, Ste. 3315

510-238-6956 (Fax)

Oakland, CA 94612-2032

KS, Kansas City and MO, Kansas City (EEC-Strategic Planning Comm.)

Mr. Cal Bender

816-474-4240 (Phone)

MARC

816-421-7758 (Fax)

600 Broadway

300 Rivergate Center

Kansas City, MO 64105-1554

MA, BOSTON (SEE EZ)

TX, Houston

Ms. Judith Butler

713-247-2666 (Phone)

Mayor's Office

713-247-3985 (Fax)

901 Bagby Street

City Hall, 4th Floor

Houston, TX 77002

www.ci.houston.texas.us

ENTERPRISE COMMUNITIES

AL, Birmingham (EC-Strategic Planning Comm.)

Ms. Alice Ann Whetzel
City of Birmingham
710 N. 20th Street
City Hall, Room 224
Birmingham, AL 35203

205-254-2870 (Phone)
205-254-2541 (Fax)

AL, Chambers County EC

David Shaw
East Alabama Regional Planning and Development Commission
P.O. Box 2186
Anniston, AL 36202

205-237-6741 (Phone)
205-237-6763 (Fax)

AZ, Arizona Border Region EC – Cochise, Santa Cruz, Yuma Counties

Joel Viers, Coordinator
AZ Border Region EC
118 Arizona St.
Bisbee, AZ 85603

520-432-5301 (Phone)
520-432-5858 (Fax)

AZ, Phoenix

Mr. Ed Zuercher
City of Phoenix
200 West Washington Street, 12th Floor
Phoenix, AZ 85003-1611

602-261-8532 (Phone)
602-261-8327 (Fax)

CA, Huntington Park EC

Mr. Parker C. Anderson
Los Angeles City & County
215 W. 6th St.
Los Angeles, CA 90014

213-485-1617 (Phone)
213-237-0551 (Fax)

CA, Imperial County EC

Maria Matthews
Imperial County Community Economic Development
836 Main St.
El Centro, CA 92243

619-337-7814 (Phone)
619-337-8907 (Fax)

CA, San Diego

Ms. Bonnie Contreras
City of San Diego
202 C Street MS 3A
San Diego, CA 92101

619-236-6846 (Phone)
619-236-6512 (Fax)

CA, San Francisco

Anna Yee
City of San Francisco
San Francisco Enterprise Community Program
25 Van Ness Avenue, Suite 700
San Francisco, CA 94102

415-252-3100 (Phone)
415-252-3110 (Fax)

CA, City of Watsonville/County of Santa Cruz EC

Carlos Palacios
City of Watsonville
215 Union St., 2nd Floor
Watsonville, CA 95076

408-728-6011 (Phone)
408-761-0736 (Fax)

CO, Denver

Mr. Ernest Hughes
City of Denver
200 W. 14th Avenue, Room 203
Denver, CO 80204

303-640-5734 (Phone)
303-640-4636 (Fax)

CT, Bridgeport

Ms. Janice Willis
Director
City of Bridgeport Central Grants Office
45 Lyon Terrece, Room 317
Bridgeport, CT 06604

203-332-5662 (Phone)
203-332-5657 (Fax)

District of Columbia

Ms. Madiene Hall
EC Coordinator
51 N Street, NE
Washington, DC 20002

202-535-1346 (Phone)
202-535-1559 (Fax)

District of Columbia

Ms. Louisa Montero-Diaz
Director of Development
Office of Grants & Management
717 14th Street, NW
12th Floor
Washington, DC 20005

202-727-6537 (Phone)
202-727-1617 (Fax)

DE, Wilmington

Mr. James Walker
Wilmington Enterprise Community
Louis L. Redding City/County Building
800 French Street, 9th Floor
Wilmington, DE 19801

302-571-4189 (Phone)
302-571-4102 (Fax)

FL, Jackson County EC

William Rimes
4288 Lafayette St.
P.O. Box 130
Marianna, FL 32447

904-526-4005 (Phone)
904-482-8002 (Fax)

FL, Tampa

Ms. Jeanette Fenton
City of Tampa
2105 N. Nebraska Avenue
Tampa, FL 33605
www.hud.gov/local/tam/tam_ecez.html

813-274-7959 (Phone)
813-274-7927 (Fax)

GA, Albany

Julie Duke
City Manager's Office
225 Pine Avenue
Albany, GA 31701

912-431-3234 (Phone)
912-431-3223 (Fax)

GA, Central Savannah River Area EC (Burke, Hancock, Jefferson, McDuffie, Tallafero, Warren Counties)

Grady Sampson
CSRA Regional Development Center
P.O. 40 4729 Quaker Rd., Suite C
Keysville, GA 30816

706-554-0342 (Phone)
706-554-6626 (Fax)

IA, Des Moines

Ms. Caroline Gathright
City of Des Moines
602 East First Street
Des Moines, IA 50309

515-283-4151 (Phone)
515-237-1713 (Fax)

IL, Springfield

Mr. Timothy Rowles
Office of Economic Development
231 South Sixth St.
Springfield, IL 62701

217-789-2377 (Phone)
217-789-2380 (Fax)

IN, Indianapolis

Ms. Jennifer Fults
Grants Manager

317-327-5899 (Phone)

Ms. Amy Arnold
Grants Analyst
Div. of Comm. Development
& Financial Services
1860 City County Building
Indianapolis, IN 46204

317-327-7876 (Phone)
317-327-5908 (Fax)

KY, Louisville (EC-Strategic Planning Comm.)

Ms. Carolyn Gatz
Empowerment Zone Community
601 West Jefferson St.
Louisville, KY 40202

502-574-4210 (Phone)
502-574-4201 (Fax)

LA, Macon Ridge EC – Catahoula, Concordia, Franklin, Morehouse, Tensas Counties

Buddy Spillers and Chip Rogers
Macon Ridge Economic Development Region, Inc.
903 Louisiana Ave.,
P.O. Drawer 746
Ferriday, LA 71334

318-757-3033 (Phone)
318-757-4212 (Fax)

LA, New Orleans (EC-Strategic Planning Comm.)

Ms. Thelma H. French
Office of Federal and State Programs
1300 Perdido Street, Room 2E10
New Orleans, LA 70112

504-565-6414 (Phone)
504-565-6423 (Fax)

LA, Northeast Louisiana Delta EC – Madison County

Moses Junior Williams
Northeast Louisiana Delta EC
400 E. Craig St., Suite B
Tallulah, LA 71282

318-574-0995
318-574-0995

LA, Ouachita Parish

Mr. Eric Loewe
Ouachita Community Enhancement Zone, Inc.
P.O. Box 4268
Monroe, LA 71211

318-329-4031 (Phone)
318-329-4034 (Fax)

MA, Lowell

Ms. Sue Beaton
Department of Planning and Development
City Hall- JFK Civic Center
50 Arcand Drive
Lowell, MA 01852

978-970-7150 (Phone)
978-446-7014 (Fax)

MA, Springfield

Mr. Miguel Rivas
Community Development Department
36 Court Street
Springfield, MA 01103

413-787-7666 (Phone)
413-787-6027 (Fax)

MI, Flint

Mr. Larry Foster
Township of Mount Morris
G-5447 Bicentennial Parkway
Mount Morris Township, MI 48458
www.flint.umich.edu/departments/pura/stratzo.htm

810-785-9138 (Phone)
810-785-2545 (Fax)

Ms. Nancy Jurkiewicz
City of Flint
1101 South Saginaw Street
Flint, MI 48502

810-766-7436 (Phone)
810-766-7351 (Fax)

MI, Muskegon

Ms. Cathy Brubaker-Clarke
City of Muskegon
Economic Development Department
933 Terrace Street
Muskegon, MI 49443

616-724-6702 (Phone)
616-724-6790 (Fax)

Ms. Reatha Anderson
Department of Planning and Community Development
2724 Peck Street
Muskegon Heights, MI 49444

616-733-1355 (Phone)
616-733-7382 (Fax)

MN, St. Paul

Ms. Harriet Horwath
City of St. Paul
Planning and Economic Development
25 West Fourth Street
St. Paul, Minnesota 55102

651-266-6591 (Phone)
651-228-3341 (Fax)

MO, City of East Prairie/Mississippi County EC

Martha Ellen Black
Epworth Bootheel Family Learning Center
207 N. Washington St.
East Prairie, MO 63845

573-649-3731 (Phone)
573-649-5028 (Fax)

MS, North Delta EC (Panola, Quitman, Tallahatchie Counties)

Queen Booker
North Delta Enterprise Community Development Corporation
P.O. Drawer 419
Lambert, MS 38643-0419

601-497-1968 (Phone)
601-487-3595 (Fax)

NC, Charlotte

Ms. Deborah D. Hazzard
Neighborhood Development Department
600 East Trade Street
Charlotte, NC 28202

704-336-2106 (Phone)
704-336-2527 (Fax)

Stanley Watkins
Key Business Executive & Neighborhood
Development
600 East Trade Street
Charlotte, NC 28202

704-336-3796 (Phone)
704-336-3904 (Fax)

NC, Halifax, Edgecombe, Wilson Counties EC

Barry Richardson
Halifax/Edgecombe/Wilson Empowerment Alliance
P.O. Box 99
Hollister, NC 27844

919-586-4017
919-586-3918

NC, Robeson County EC

Cammie Fluery
Lumber River Council of Governments
4721 Fayetteville Rd.
Lumberton, NC 28358

910-618-5533 (Phone)
910-618-5576 (Fax)

NE, Omaha

Mr. Scott Knudsen
City of Omaha
1819 Farnam Street
Suite 1100
Omaha, NE 68183
www.ci.omaha.ne.us

402-444-5381 (Phone)
402-444-6140 (Fax)

NH, Manchester

Ms. Amanda Parenteau
City of Manchester
889 Elm Street, 5th Floor
Manchester, NH 03101

603-624-2111 (Phone)
603-624-6308 (Fax)

NJ, Newark (EC-Strategic Planning Comm.)

Ms. Angela Corbo
Department of Administration
City Hall, Room B-16
920 Broad Street
Newark, NJ 07102

973-733-4331 (Phone)
973-733-3769 (Fax)

NM, Albuquerque

Ms. Sylvia Fettes
Family & Community Services Department
400 Marquette, NW, Ste. 504
Albuquerque, NM 87103

505-768-2860 (Phone)
505-768-3204 (Fax)

NM, La Jicarita EC (Mora, Rio, Arriba, Taos Counties)

Kelley Fahey
La Jicarita Ent. Comm., c/o Helping Hands, Inc.
P.O. Box 777
Mora, NM 87732

505-387-2293 (Phone)
505-387-2289 (Fax)

NV, Las Vegas (EC- Strategic Planning Comm.)

Ms. Yvonne Gates
Clark County Commissioners Office
500 South Grand Central Parkway
P.O. Box 551601
Las Vegas, NV 89155-1601

702-455-3239 (Phone)
702-383-6041 (Fax)

Ms. Jennifer Padre
Southern Nevada Enterprise Community
500 South Grand Central Parkway
P.O. Box 551212
Las Vegas, NV 89155-1212

702-455-5025 (Phone)
702-455-5038 (Fax)

NY, Albany/Troy/Schenectady

Mr. Anthony Tozzi
Center for Economic Growth
One Key Corp Plaza
Suite 600
Albany, NY 12207

518-465-8975 (Phone)
518-465-6681 (Fax)

NY, Buffalo

Ms. Paula Rosner
Buffalo Enterprise Development Corporation
617 Main Street
Buffalo, NY 14202
www.buffalodevelopment.com

716-842-6923 (Phone)
716-842-6942 (Fax)

NY, Newburgh/Kingston

Ms. Allison Lee
The Kingston-Newburgh Enterprise Corp.
62 Grand Street
Newburgh, NY 12550

914-569-1680 (Phone)
914-569-1630 (Fax)

NY, Rochester

Ms. Valerie Wheatley
Staff assistant to the Deputy Mayor
City of Rochester
Room 205A, City Hall
30 Church Street
Rochester, NY 14614

716-428-7207 (Phone)
716-428-7069 (Fax)

OH, Akron

Mr. Jerry Egan
Department of Planning & Urban Development
166 South High Street
Akron, OH 44308-1628
www.ci.akron.oh.us/plud03.html

330-375-2090 (Phone)
330-375-2387 (Fax)

OH, Greater Portsmouth EC – Scioto County

Alex Maksimovic
City of Portsmouth Community Development Department
740 2nd St.
Portsmouth, OH 45662

614-354-5673 (Phone)

OK, Oklahoma City

Mr. Carl Friend
Oklahoma City Planning Department
420 West Main Street, Suite 920
Oklahoma City, OK 73102

405-297-2574 (Phone)
405-297-3796 (Fax)

OK, Southeast Oklahoma EC (Choctaw and McCurtain Counties)

Bob Yandell
Little Dixie Community Action Agency, Inc.
502 West Duke St.
Hugo, OK 74743

405-326-6441 (Phone)
405-326-6655 (Fax)

OR, Josephine County EC

Teal Kinamun
Josephine County Community Service-Comm. Action Agency
317 Northwest B St.
Grants Pass, OR 97526

503-474-5448 (Phone)
503-474-5454 (Fax)

OR, Portland

Ms. Regena S. Warren
Multnomah County
421 SW Sixth Avenue, Suite 700
Portland, OR 97204
www.netc.org/ec

503-248-3691 (Phone)
Ext. 28134
503-248-3379 (Fax)

PA, City of Lock Haven EC – Clinton County

Maria Boileau
City of Lock Haven
20 E. Church St.
Lock Haven, PA 17745

717-893-5903 (Phone)
717-893-5905 (Fax)

PA, Harrisburg EC

Ms. JoAnn Partridge
City of Harrisburg
MLK City Government Center
10 North Second Street, Ste. 206
Harrisburg, PA 17101-1681

717-255-6424 (Phone)

PA, Pittsburgh

Ms. Joan Blaustein
City Planning Dept.
City of Pittsburgh
200 Ross Street, 4th Floor
Pittsburgh, PA 15219

412-255-2206 (Phone)

412-255-2838 (Fax)

RI, Providence EC

Ms. Kim Rose
Providence Plan
56 Pine Street, Suite 3B
Providence, RI 02903

401-455-8880 (Phone)

401-331-6840 (Fax)

SC, Charleston/North Charleston EC

Ms. Patricia W. Crawford
Housing / Community Development
75 Calhoun Street
Division 616
Charleston, SC 29401-3506

803-724-7347 (Phone)

803-724-7354 (Fax)

SC, Williamsburg/Lake City EC

Faith Rivers
Williamburg Enterprise Community
147 W. Main St.
Kingstree, SC 29556

803-354-9070 (Phone)

803-354-2106 (Fax)

SD, Beadle/Spink Dakota EC

Robert Hull
Northeast South Dakota Community Action Program
414 Third Ave.
Sisseton, SD 57262

605-698-7654 (Phone)

605-698-3038 (Fax)

TN, Fayette County/Haywood County EC

John Sicola
The Fayette Haywood Enterprise Community Steering Committee
157 Poplar Rd., Rm. B150
Memphis, TN 38103

901-576-4610 (Phone)

901-576-3519 (Fax)

TN, Scott/McCreary Area EC (Scott, TN and McCreary, KY)

Leslie Winningham
Scott McCreary Area Revitalization Team (SMART)
407 Industrial Lane, Suite 2
Oneida, TN 37841

423-569-6380 (Phone)
423-569-5710 (Fax)

TX, Dallas EC

Mr. Mark Obeso
Empowerment Zone Manager
1500 Marilla, 2B South
Dallas, TX 75201

214-670-4897 (Phone)
214-670-0158 (Fax)

TX, San Antonio EC

Mr. Curley Spears
City of San Antonio
419 South Main, Suite 200
San Antonio, TX 78204

210-207-6600 (Phone)
210-886-0006 (Fax)

TX, Waco EC

Mr. Charles Daniels
City of Waco
P.O. Box 2570
Waco, TX 76702-2570

254-750-5640 (Phone)
254-750-5880 (Fax)

UT, Ogden EC

Ms. Karen Thurber
Ogden City Neighborhood Development
2484 Washington Blvd., Ste 211
Ogden, UT 84401

801-629-8943 (Phone)
801-629-8902 (Fax)

VT, Burlington EC

Mr. Brian Pine
Office of Community Development
City Hall, Room 32
Burlington, VT 05401

802-865-7232 (Phone)
802-865-7024 (Fax)

VA, Accomack EC – Northampton Counties

Monte Penney
The Economic Empowerment & Housing Corporation
P.O. Box 814
Nassawadox, VA 23413

804-442-4509 (Phone)
804-442-7530 (Fax)

WA, Lower Yakima County Rural EC

Dave Fontara
Yakima County
128 North Second St.
Yakima, WA 98901
Phone: Fax:

509-574-1500 (Phone)
509-574-1501 (Fax)

WA, Seattle

Mr. Charles Depew
City of Seattle
Seattle Municipal Building
Second Floor
Seattle, WA 98104-1826

206-684-0208 (Phone)
206-684-0379 (Fax)

WA, Tacoma

Dr. Shirl E. Gilbert II
Tacoma Empowerment Consortium
1101 Pacific Avenue
Tacoma, WA 98402

253-274-1288 (Phone)
253-274-1289 (Fax)

WV, Central Appalachia EC (Braxton, Clay, Fayette, Nicholas, Roane Counties)

Terrell Ellis
Central Appalachia Empowerment Zone
174 Main St.
P.O. Box 176
Clay, WV 51215

304-587-2034 (Phone)
304-587-2027 (Fax)

WV, McDowell County EC

Cliff Moore
McDowell County Action Network
Route 103
Wilcoe, WV 24895

304-448-2118 (Phone)
304-448-3287 (Fax)

WI, Milwaukee EC

Mr. Glen Mattison
Community Block Grant Administration
City Hall, Room 606
200 East Wells Street
Milwaukee, WI 53202

414-286-3760 (Phone)
414-286-5003 (Fax)

**Round 2 Rural Empowerment Zones/Enterprise Communities Contact List
As of July 1999**

Name**Phone & Fax Numbers****Empowerment Zones****CA, Desert Communities**

John Thurman
Riverside County Economic Development Agency
46-209 Oasis Street, 2nd Floor
Indio, CA 92201

760-863-8225 (Phone)

GA, Southwest Georgia United

Kim Sheffield
Executive Director
P.O. Box 587
Cordele, GA 31010

912-273-9111 (Phone)

IL, Southernmost Illinois Delta

Donna Raynalds
Alexander, Pulaski, and Johnson
Empowerment Zone Steering Committee
219 Rustic Campus Drive
Ullin, IL 62992

618-634-9471 (Phone)

618-634-9452 (Fax)

ND, Griggs-Steele

Irvin Rustad
Director
Lake Agassiz Regional Development Corporation
417 Main Avenue
Fargo, ND 58103

701-235-1197 (Phone)

SD, Oglala Sioux Tribe

Darrel M. Twiss
Business and Economic Development Committee
PO Box A2
Pine Ridge, SD 57770

605-867-5771 (Phone)

Enterprise Communities**AK, Metlakatla Indian**

Timothy Gilmartin
Mayor
Metlakatla Indian Community
P.O. Box 8
Metlakatla, AK 99926-0008

907-886-4441 (Phone)

907-886-3338 (Fax)

AZ, NM, UT, Four Corners

Larry Rodgers
Acting Chairman
c/o Division of Economic Development
Four Corners Empowerment Zone Corporation
PO Box 663
Window Rock, AZ 86515

435-678-1468 (Phone)

435-678-1464 (Fax)

CA, Central California

Zak Gonzalez
City Administrator
The Central Committee of the Central
California Enterprise Committee
633 Sixth Street
Orange Cove, CA 93646

209-626-5100 (Phone)

FL, Empowerment Alliance of Southwest Florida

Barbara J. Kent
Executive Director
The Community Foundation of Collier County
2400 Tamiami Trail North, #300
Naples, FL 34103

941-649-5000 (Phone)

HI, Molokai

Karen M. Holt
Executive Director
The Moloka'i Community Service Council
P.O. Box 1046
Kaunakakai, HI 96748

808-553-3244 (Phone)

IN, Town of Austin

Lanny McIntosh
Town Council President
Austin Enterprise Community Board
80 West Main Street
Austin, IN 47102

812-794-2877 (Phone)

812-794-2859 (Fax)

KS, Wichita County

Sharla Krenzel
Director
Wichita County Economic Development
P.O. Box 345
Leoti, KS 67861

316-375-2182 (Phone)

316-375-4350 (Fax)

KY, Bowling Green

Charlotte Mathis
Grants Manager
City of Bowling Green Housing and
Community Development Department
P.O. Box 430
Bowling Green, KY 42102-0430

502-393-3000 (Phone)

ME, City of Lewiston

John C. Bott
Grants Coordinator/Project Leader
City of Lewiston
27 Pine Street
Lewiston, ME 04240

207-784-2951, ext. 315 (Phone)
207-784-2959 (Fax)

MI, Clare County

Timothy Wolverton
Clare County Administrator
Clare County Board of Commissioners
225 West Main Street
Harrison, MI 48625

517-539-2510 (Phone)
517-539-2588 (Fax)

MT, Fort Peck Assiniboine and Sioux Tribe

Susan Parker
Planning Development Center
Fort Peck Tribes
PO Box 1027
Poplar, MT 59255

406-768-5155, ext. 321 (Phone)
406-768-5478 (Fax)

NM, City of Deming

John Strand
Administrator
City of Deming
PO Box 706
Deming, NM 88031

505-546-8848 (Phone)

OK, Tri-County Indian Nations

Billie J. Floyd
Executive Director
Tri-County Indian Nation Community
Development Corporation
Rt. 7, Box 238
Ada, OK 74820

580-332-3257 (Phone)

PA, Fayette

Debra Hanna
National City Bank Building
Fay-Penn Economic Development Council
2 West Main Street, Suite 407
Uniontown, PA 15401

724-437-7913 (Phone)
724-437-7315 (Fax)

SC, Allendale County ALIVE

Joe Vuknic
Chairman
P.O. Box 25
Allendale, SC 29810

803-584-7117 (Phone)

TN, Clinch-Powell

Marvin Hammond
Chairman
Clinch-Powell Resource Conservation
& Development Council
PO Box 379
Rutledge, TN 37861

423-828-5927 (Phone)

423-828-5212 (Fax)

TX, FUTURO

Tammye Carpinteyro
Economic Development Director
Middle Rio Grande Development Foundation, Inc.
101 Courthouse Square
Cotulla, TX 78014

830-879-4212 (Phone)

830-879-3267 (Fax)

WA, Five Star

Mr. Warren Jimenez
Tri-County Economic Development District
347 West Second, Suite A
Colville, WA 99114

509-684-4571 (Phone)

509-684-4788 (Fax)

WI, Northwoods Nijii

Gale Kruger
Executive Director-Office of Economic Development
Menominee Indian Tribe of Wisconsin
4 Loop Road
P.O. Box 910
Keshena, WI 54135-0910

715-799-5128 (Phone)

715-799-4525 (Fax)

WV, Upper Kanawha Valley

Gregory K. Lipscomb, AICP
The Kanawha County Commission
East Kanawha County Courthouse
407 Virginia Street
Charleston, WV 25336

304-357-0570 (Phone)

ROSS FY 1999 FUNDING

**RESIDENT SERVICE DELIVERY
MODELS**

TAB 8

CERTIFICATIONS AND ASSURANCES

**ROSS FY 1999 FUNDING
RESIDENT SERVICE DELIVERY MODELS**

OTHER CERTIFICATIONS AND ASSURANCES

Insert the following signed forms in this tab. Blank copies of these forms can be found in Part VII of this application kit.

- ☐ Assurances – Non-Construction Programs (Form SF-424B)
- ☐ Certification for a Drug-Free Workplace (Form HUD–50070)
- ☐ Applicant/Recipient Disclosure/Update Report (Form HUD-2800)
- ☐ Applicant's Disclosure on Lobbying Activities
- ☐ Disclosure of Lobbying Activities (Form SF- LLL)
- ☐ Certification of Payments to Influence Federal Transactions (Form HUD-50071)
- ☐ Certification or Disbarment and Suspension (Form HUD–2992)
- ☐ Acknowledgement of Application Receipt

